

A Guide to Supervision in Kent, Surrey and Sussex Primary Care



Document Status

Purpose	This guidance draws together the supervision requirements for learners in primary care.
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Version Control	Version 2.1
Ratified by	Kent Surrey Sussex Primary Care Department Strategy Group
Ratified date:	01 August 2024
Review date	01 August 2027
Target Audience	Primary Care Department, Kent Surrey Sussex Training Hubs, Kent Surrey Sussex Primary Care Networks and General Practices.

Contents

Introduction	4
Allied Health Professionals	5
Medical	7
Multi-professional Roles	9
Nursing	11
Personalised Care and Other Unregistered Roles	14
Pharmacy	16
Glossary of Educators	19
Glossary of Terminology	27
Supervision Courses	29
Further Reading	32
Acknowledgements	35

Introduction

Supervision can mean many things to different health care professionals, and it is important that there is clarity between supervisor and supervisee about the purpose of their supervisory relationship. This document clarifies both the requirements for specific learners and employees in specific roles in primary care. This document does not include details on reflective clinical supervision, restorative supervision, appraisal, continuing professional development supervision or management supervision.

Where this document refers to clinical supervision this is defined as supervision of clinical activity which is a professional duty and employer responsibility. [The Care Quality Commission \(2008\)](#) remind us that *'all staff must receive the support, training, professional development, supervision and appraisals that are necessary for them to carry out their role and responsibilities'*. Where the term 'GMC recognised GP supervisor' is referred to, this role can only be carried out by those who have completed the relevant NHS England course and subsequent quality approval process.

The reader is reminded that the language within this guidance is nuanced by the perspective of whether supervision is taking place as part of contractual requirements, educational or day-to-day [workplace culture](#). Abbreviations used throughout this document are described in full in the glossaries.



Role	Supervision
Allied Health Professionals	
<p>Pre-registration Allied Health Professionals (AHPs)</p>	<p>Minimum of 1,000 hours of placement learning over a 3-year programme, not all of which will be in primary care.</p> <p>AHP’s require a named supervisor (Practice Educator) within the team to be identified as the person who will complete assessments with the student. The student is encouraged to compile their supporting evidence from all the professions involved in their learning and development to support their assessment.</p> <p>If the supervisor is not from the same profession as the learner, they also require indirect (long arm) clinical supervision once a week from an external profession specific supervisor. The on-site educator would also provide daily support as needed.</p> <p>The Practice Educator should have completed an AHP practice educator course.</p> <p>All other professionals supervising pre-registration AHPs should have completed some form of educator preparation, including practice assessor, practice supervisor, roadmap supervisor or other supervision courses run by the HEI placing the learners.</p>
<p>Trainee First Contact Practitioners (FCP)</p> <p>Dietician, MSK Physiotherapist, Occupational Therapist, Paramedic, Podiatrist.</p>	<p>The CQC Mythbuster - Staff not directly employed by a GP practice states that: <i>Providers must make sure staff are competent and provide appropriate supervision and oversight. A senior member of the clinical primary care team should provide day-to-day supervision of all clinical staff under their direction and control.</i></p> <p>From April 2024 access and completion of the roadmaps to practice has changed. Trainee FCPs are invited to apply for a funded place with an education provider of FCP training. The HEI will align the learner to the best route, either the supported portfolio or taught route. Portfolios will be submitted to the</p>



	<p>HEI for verification upon completion. Learners on both the supported portfolio and taught route will require a named Clinical Supervisor/Practice Educator in practice.</p> <p>The HEI will be responsible for academic progress, and the GP practice/PCN will provide a Clinical Supervisor. The Clinical Supervisor should be appropriately trained to supervise the trainee FCP. For further advice and guidance please see FCP Supervisor FAQ.</p> <p>The minimum recommended clinical supervision time should be one hour per month plus daily debrief of 20-30 mins per day (not necessarily face to face) should be provided. Whilst time for supervision should be negotiated locally, in line with apprenticeships, it is recommended that a job plan of 80% clinical and 20% non-clinical be used to create supervision time for trainee FCPs.</p>
<p>Qualified First Contact Practitioners (FCP)</p> <p>Dietician, MSK Physiotherapist, Occupational Therapist, Paramedic, Podiatrist.</p>	<p>Once practitioners have completed a recognised FCP qualification they should have access to appropriate day-to-day clinical supervision and an appropriate named individual in the PCN to provide general advice and support on a day-to-day basis, as per the PCN Network Direct Enhanced Service 24/25.</p> <p>A qualified FCP should be supported to become an educator to build an educational supervision network across a PCN for trainee FCPs. AHP practice educator training can be found here.</p>
<p>SECAMB Trainee Advanced Practitioner (AP) Paramedics</p> <p>(Specialist Paramedic Placements - KSS and SECAMB specific)</p>	<p>Each trainee AP Paramedic will be placed in a GP training practice, with a named GMC recognised GP Clinical or Educational supervisor. An AP with a recognised advanced practice qualification with three years' AP experience and an appropriate clinical supervision/practice educator qualification may also support these learners as an Associate Supervisor.</p>



Medical	
Student Physician Associates	<p>PA students must be supervised by a GP at all times whilst on placement but may spend time with others from the MDT. This supervision may be direct or indirect as appropriate for their level of competence as assessed by the delegating GP.</p> <p>As of July 2024, there are no specific training requirements for PA student supervisors.</p> <p>However, qualified GPs that provide day-to-day supervision to student PAs working in primary care may wish to formalise their role as an educator, and access learning and development to support them in their role. This may be used as evidence for annual appraisal.</p> <p>The KSS Primary Care School has worked with the KSS University PA Programme Leads and whilst not mandatory, recommends GPs may wish to become GMC recognised Clinical Supervisors (see educator glossary below for further information and alternative e-learning) when supervising PA students.</p>
Apprentice Physician Associates	<p>Supervision requirements as above for all student PAs.</p> <p>During the initial phase of the apprenticeship, all apprentice Physician Associate work activities should be under the direct guidance and supervision of a registered medical practitioner. As the apprentice progresses, following discussion and agreement with their mentors and supervisors, supervision and guidance may be both direct and indirect. Supervision and guidance may be provided by both the GP and other members of the practice team.</p> <p>Further information and guidance can be found Physician Associate Apprenticeship FAQ.</p>
For PA's completing the SE PA faculty preceptorship programme	<p>The PA will have a named GMC-recognised GP Clinical Supervisor within the GP practice. They will require access to a mentor (who is not required to work in the same practice). They must also have regular access to a GMC-recognised GP Educational Supervisor.</p>
Physician Associate (PA)	<p>As a dependant practitioner, a PA must always be supervised by a named GP.</p>



	<p>The PA supervisor is a specifically named, fully qualified GP who understands their PA's own experience, knowledge, training, and skills to confidently delegate appropriate tasks to the PA.</p> <p>The named supervising GP* must work for the same employer (legal requirement), understand the PA's individual scope of practice and oversees the PA's development through supervising their day-to-day activities, which must include appropriate debriefing.</p> <p>Day-to-day supervision can be delegated to other GPs as per GMC Good Medical Practice Guidance if necessary and other members of the MDT can be involved in induction and training.</p> <p>Where delegated appropriately PAs are responsible and accountable for their practice. The named GP will remain responsible for the overall management of the patient, any decisions around transfer of care, and the processes in place to ensure patient safety.</p> <p>*The requirements for the PA supervisor:</p> <ul style="list-style-type: none">• must hold a full registration with a licence to practise with the General Medical Council• must appear on the GP register• must be actively practicing in the United Kingdom• must not have restrictions against their practice from their employer or regulator that prevent them from fulfilling their role.
Medical students	<p>Determined by each medical school but governed by the GMC.</p> <p>KMMS places in GP training practices, with GMC-recognised GP supervisors signing off assessments.</p> <p>BSMS does not require you to have had teaching experience but provides half day training to those interested. GPs wishing to supervise medical students can access the KSS GMC-recognised GP supervisor course if they wish to.</p>

	Some supervision may be delegated to other healthcare professionals as appropriate and in agreement with the relevant medical school. Other medical schools may require different supervision. Please liaise as appropriate.
Foundation Year 2 Doctors	The Educational Supervisor is designated by their first rotation (usually hospital based) and Primary Care provides the clinical supervision element when placed in primary care, provided by a GMC-recognised GP Clinical Supervisor in an approved clinical learning environment.
GP Specialty Trainee ST1-3	GP Training is a 36-month program. Currently 12 months is spent in secondary care and 24 months in primary care in approved training practices. All GP trainees have a GMC-recognised GP Educational Supervisor overall, and a named Clinical Supervisor within each post.
Multi-Professional Roles	
Mental Health Practitioner	May be from a nursing, occupational therapy or clinical psychologist background and has access to appropriate clinical supervision and an appropriate named individual in the PCN to provide general advice and support on a day-to-day basis (this could be provided by a nurse, GP, AHP with appropriate mental health experience).
Trainee Independent Prescribers	<p>Trainee Independent Prescribers should be supervised by a 'Designated Prescribing Practitioner supervisor' (DPP). This role can be carried out by any experienced Independent Prescriber of any registered health care professional background.</p> <p>A DPP is a healthcare professional in Great Britain or Northern Ireland with legal independent prescribing rights who supervises a health care professional during their IP course and provides 'sign-off' on their competency to prescribe.</p> <p>The DPP must be an active prescriber with at least three years' experience in a patient facing role, with appropriate knowledge and experience relevant to the pharmacist's area of clinical practice. The DPP competency framework outlines specific knowledge and experience per profession.</p>



	<p>The DPP is required to provide at least 90 hours of clinical supervision over the duration of the course, typically this will be 5-6 months. The specific activities that a DPP is required to undertake will vary between courses and the learner, it is advised that the DPP discusses these requirements with the trainee Independent Prescriber's course provider.</p>
Trainee Advanced Practitioners (AP)	<p>Must have access to a named 'co-ordinating education supervisor' before commencing training and 'associate workplace supervisors'. They do not need to be from the same professional background but need to have expert knowledge of the area they are supervising and have experience as an educator, to support learning, development, assessment and verification of competence and capability.</p> <p>The Minimum Standards for Advanced Practice Supervision state that</p> <p>The co-ordinating education supervisor must:</p> <ul style="list-style-type: none">• be an experienced practitioner.• have completed some formal supervisor development. Examples of formal training include clinical educator programmes; post-graduate certificate in clinical education; practice educator programmes; local supervisor training courses.• have completed the 'supervisor readiness checklist' before agreeing to take on the role. <p>If the co-ordinating education supervisor is an advanced practitioner, they must:</p> <ul style="list-style-type: none">• have worked at advanced level for a minimum of 3 years. There should be clear justification for an advanced practitioner with less than 3 years' experience undertaking this role. <p>Associate workplace supervisors must:</p> <ul style="list-style-type: none">• demonstrate expert knowledge and capability of the area of practice they are supervising.



	<p>There must be a delegate or replacement supervisor in the event the co-ordinating education supervisor is on leave for a prolonged period of 4 weeks or more.</p> <p>The trainee AP can expect to work with a variety of associate workplace supervisors, each matched to support the development of specific, identified aspects of AP capability or competence. An associate workplace supervisor should be appraised of the multi-professional considerations associated with AP development and supervision.</p> <p>Both the education and associate workplace supervisor may also have responsibility for workplace assessment and verification of the trainee's advanced level capabilities.</p> <p>A minimum of 1-hour scheduled supervision a week, of which one in four (once a month) is with the co-ordinating education supervisor. In some practice contexts it may be necessary to debrief with daily supervision to ensure patient and practitioner safety.</p> <p>Further guidance and information can be found at Supervisor Capabilities for Advanced Practice and Minimum Standards for Supervision.</p>
Qualified Advanced Practitioners (AP)	<p>Must have access to regular constructive clinical supervision that enables reflective practice together with robust annual appraisal. Multi-Professional Framework for Advanced Clinical Practice in England</p> <p>A qualified AP should contribute to the supervision demands of general practice workforce.</p>
Nursing	
Healthcare Support Worker / Healthcare Assistant (HCA)	<p>Work must be appropriately delegated and clinically supervised by a registered healthcare professional until competence is demonstrated by the HCA. Day-to-day clinical supervision should be available as required.</p>



<p>Student Nursing Associate (SNA)</p> <p>(Formerly known as Trainee Nursing Associate)</p>	<p>A SNA must be provided with an NMC registered Practice Assessor. This can be either an RN or registered NA. The Practice Assessor does not have to work in the same practice/PCN. An indirect supervision or assessment model can be adopted.</p> <p>In addition, the SNA requires a Practice Supervisor within the same practice/PCN. This supervisory role can be shared across a small number of registered healthcare professionals who provide day-to-day support to the SNA, role modelling and feedback on progress to the Practice Assessor. The Practice Assessor is responsible for making assessment decisions, seeking feedback from Practice Supervisors and where necessary communicating with the HEI academic assessor. The Practice Assessor and Practice Supervisor cannot be the same person.</p> <p>Please note that all newly registered nursing associates now graduate as supervisor ready. They will require support and training to develop their supervision skills before taking on an assessor role.</p>
<p>Registered Nursing associate (NA)</p>	<p>An NA is a registered professional that has met the standards of proficiency from the NMC. They need to revalidate every three years and have the same professional code as registered nurses.</p> <p>As an associate role, tasks and duties must be delegated by an appropriate registered healthcare professional.</p> <p>The NA must have access to appropriate clinical supervision and an appropriate named individual in the PCN or practice to provide general advice and support on a day-to-day basis. This would typically be an NMC registered nurse (RN) but may be another registered healthcare professional, including a registered care home manager as appropriate.</p> <p>The delegating clinician is accountable for their decision making, appropriate delegation and overall management, the NA is responsible as a registrant for their decisions and actions and should not take on the delegation unless confident and competent in the delegated task/duty.</p>



	<p>As for all registrants ongoing clinical supervision is required to ensure the NA remains clinically competent and they are learning to improve their skills. Additional requirements for clinical supervision will be needed when completing education and training.</p> <p>An NA is accountable to the NMC, and practices under the direction of an RN or registered healthcare professional contributing to care delivery as per their individual scope of practice. The NA can contribute to and monitor care that has been delegated by another registered healthcare professional. The NA is unable to independently coordinate, plan, assess or evaluate care delivery and therefore are unable to work in isolation running independent clinics.</p> <p>This role is intended to bridge the gap between RNs and Healthcare Support Worker, to form part of a vocational pathway into nursing and to free up RNs to lead, co-ordinate and manage complex patient care.</p>
<p>Pre-registration Nursing Students</p> <p>(Can include adult, child, learning disability or mental health students)</p>	<p>Pre-reg nursing students require 2300 hrs of clinical placement activity over 3 years for undergraduates (reduced for accelerated post-graduate programmes). Placements are of varying lengths in primary care from one day 'spoke' visits up to 12-week placements at any point in the programme.</p> <p>Students must be provided with an NMC registered Practice Assessor, this must be a registered nurse. The Practice Assessor does not have to work in the same practice/PCN. An indirect supervision or assessment model can be adopted.</p> <p>In addition, the nursing student requires a Practice Supervisor within the same practice/PCN. This supervisory role can be shared across a small number of registered healthcare professionals who provide day-to-day support to the nursing student, role modelling and providing feedback on progress to the Practice Assessor.</p> <p>The Practice Assessor is responsible for making assessment decisions, seeking feedback from Practice Supervisors, and liaising with the HEI academic assessor. The Practice Assessor and Practice Supervisor cannot be the same person.</p>



	<p>Please note that all newly qualified nurses now graduate as supervisor ready. They will require support and training to develop their supervision skills before taking on an assessor role.</p>
General Practice Nurses (GPNs)	<p>GPNs should have access to appropriate clinical supervision and an appropriate named individual in the PCN/practice to provide general advice and support on a day-to-day basis. This may be another registered health care professional.</p> <p>Clinical supervision is effective in ensuring a GPN remains clinically competent and that they are learning to improve their skills. Clinical supervision can be part of the process to help RNs to revalidate. It can be undertaken with a suitably trained peer, follow a framework and be documented. The level and amount of clinical supervision will be dependent on the GPNs experience and knowledge relevant to their scope of practice. CQC Mythbuster - Practice Nurses</p> <p>Additional requirements for clinical supervision will be needed when completing education and training.</p>
Enhanced Level General Practice Nurse	<p>Clinical supervision requirements are as above for GPNs.</p> <p>More information on this level of practice can be found in the GPN Career and Core Capability Framework.</p>
Personalised Care and Other Unregistered Roles	
Care Coordinator (CC) (DES guidance)	<p>The CC must have access to a first point of contact for general advice and support. This could be provided by one or more named individuals within the PCN. This must be a member of staff with relevant competencies, as described in the Workforce Development Framework.</p> <p>A PCN will ensure the PCN's Care Coordinator(s) can discuss patient related concerns and be supported to follow appropriate safeguarding procedures (e.g. abuse, domestic violence and support with mental health) with a relevant GP.</p>

<p>Health & Wellbeing Coach (HWBC)</p> <p>(DES guidance)</p>	<p>The HWBC must have access to a first point of contact for general advice and support. This could be provided by one or more named individuals within the PCN. This must be a member of staff with relevant competencies, as described in the Workforce Development Framework.</p> <p>Must have formal individual and group coaching supervision from a suitably qualified or experienced health coaching supervisor.</p> <p>A PCN will ensure the PCN's Health and Wellbeing Coach(es) can discuss patient related concerns and be supported to follow appropriate safeguarding procedures (e.g. abuse, domestic violence and support with mental health) with a relevant GP.</p>
<p>General Practice Assistant (GPA)</p> <p>(Learner)</p>	<p>The GPA learner on a HEI programme must have a GP as their primary mentor, who can provide clinical supervision and sign off clinical competencies. A secondary mentor can sign off the non-clinical competencies and other members of the multi-disciplinary team can offer support.</p> <p>Staff can be trained in-practice, with their development led by GPs, in line with the role outline and national competency framework.</p> <p>The GP mentor is required to support the GPA learner for one session per week.</p>
<p>General Practice Assistant (GPA)</p>	<p>Trained GPAs are recommended to have regular supervision with an RN or senior clinical professional including an AP or GP.</p>
<p>Social Prescribing Link Worker (SPLW)</p> <p>(DES guidance)</p>	<p>The SPLW must have access to a first point of contact for general advice and support. This may be provided by one or more individuals within the PCN. This must be a member of staff with relevant competencies, as described in the Workforce Development Framework.</p> <p>Must have monthly access to clinical supervision with a relevant health care professional.</p> <p>The SPLW must attend peer support networks delivered at place or system by NHS England or ICS in the region.</p>



	<p>The PCN will ensure the Social Prescribing Link Worker(s) can discuss patient related concerns and be supported to follow appropriate safeguarding procedures (e.g. abuse, domestic violence and support with mental health) with a relevant GP.</p>
Pharmacy	
Undergraduate student pharmacist	<p>During placements, undergraduate pharmacy students must be supervised by a registered healthcare professional. The named supervisor is typically a clinical pharmacist; however, this could also be a pharmacy technician, a registered nurse or AHP. Supervisors do not have to be a prescriber, but it is expected during their placement they would spend some time observing a prescribing environment.</p> <p>Supervisors should have an understanding and experience of using workplace-based assessments (e.g. CBD, mini-CEX, MRCF, DOPs). These assessments are outlined in the supervisor and student placement handbooks, and some universities offer pre-placement briefings or Q&As with placement providers.</p> <p>Supervisor training is available on e-Learning for Health (see section – supervision courses). This training is recommended but not mandatory.</p> <p>During placements, student pharmacists could spend time with a variety of professionals and different types of learning opportunities. This may include time with any member of the practice or PCN team, both clinical and non-clinical. Not all placement activities need to be patient facing, although there should be a link to patient care.</p>
Pharmacy Support Staff/Pharmacy Assistant/Medicines Counter Assistant (Learners)	<p>Working under the supervision of another person while they are in training. This could be a registrant or another appropriately qualified or experienced individual.</p> <p>See the GPhC Standards for registered pharmacies. Educational Supervisor - responsible for the overall supervision and management of educational progress during training or series of placements.</p>



	<p>Practice Supervisor – provides the day-to-day supervision for trainees, providing developmental feedback, within specific placement. Examples of a Practice Supervisor can include GPs, RN, AHP, pharmacist and a pharmacy technician.</p>
Pharmacy Support Staff/Pharmacy Assistant/Medicines Counter Assistant	<p>Work under supervision, direction, or guidance of a pharmacy professional to ensure safe transportation of medicines.</p>
Pre-Registration Trainee Pharmacy Technicians	<p>Work under supervision, direction, or guidance of a pharmacist to ensure safe, effective, and efficient use of medicines.</p> <p>Work under the supervision, direction, or guidance of a pharmacy professional directly for no less than 14 hours per week.</p> <p>Educational Supervisor - responsible for the overall supervision and management of educational progress during training year or series of placements. Must be registered with the General Pharmaceutical Council as a Pharmacy Technician or Pharmacist</p> <p>Practice Supervisor – provides the day-to-day supervision for trainees, providing developmental feedback, within specific placement. Examples of a Practice Supervisor can include GP, RN, AHP, pharmacist and a pharmacy technician.</p>
Pharmacy Technician	<p>The pharmacy technician must be working under appropriate clinical supervision to ensure safe, effective and efficient use of medicines.</p> <p>Appropriate clinical supervision for a pharmacy technician is a pharmacy professional in the same area of practice. A GP can take on this role but should liaise with a senior pharmacy professional to understand the scope of practice of pharmacy technicians and how they can develop.</p>



<p>Foundation Trainee Pharmacist/Foundation Training Year 5</p> <p>(Formerly known as pre-reg pharmacist)</p>	<p>Foundation trainee pharmacists require a Designated Supervisor (DS) who is responsible for the overall supervision and management of educational progress during training and end of training sign off. The DS must be registered with the General Pharmaceutical Council (GPhC) and meet requirements to be a trainee’s named DS.</p> <p>Foundation trainees must have regular documented meetings with the DS. Progress review meetings are undertaken at weeks 13, 26, 39 and 52.</p> <p>Practice Supervisor – a trainee may have practice supervisors who provide the day-to-day supervision for trainees, providing developmental feedback within specific placements. Examples of a practice supervisor can include GP, RN, AHP, pharmacist and a pharmacy technician.</p> <p>The reforms to the Initial Education and Training of Pharmacists (IETP Reforms), come into place in 2025/2026 for foundation training. Trainee pharmacists will, in addition to a DS, need to have a Designated Prescribing Practitioner (DPP), during their foundation training year to oversee and sign off prescribing activities. The DPP must be a healthcare professional with an annotation or automatic right to prescribe (for example a medical practitioner, pharmacist, nurse, physiotherapist or paramedic), who will mentor and supervise the foundation trainee and provide formal confirmation of the trainee’s competence in prescribing. During this year, foundation trainee pharmacists must complete at least 90 hours of supervised practice specifically related to prescribing. Foundation trainee pharmacists may be supervised by a range of healthcare professionals, other than their designated supervisor and designated prescribing practitioner. The DS and DPP can be the same person if the person in question has the appropriate qualifications to do so</p> <p>More information on the IETP reforms and additional supportive documents can be found here</p>
<p>Clinical Pharmacist</p>	<p>Each pharmacist must receive a minimum of one supervision session per month by a senior clinical/advanced practice pharmacist and be part of a professional clinical network.</p>



They should also have access to a named Clinical Supervisor who should be a GP for support and development. This does not need to be a GMC-recognised GP supervisor but any appropriate member of the GP team.

Clinical pharmacists can be newly registered (Year 6's) or more experienced. Therefore, supervision requirements will vary.

The senior clinical/advanced practice pharmacist must receive a minimum of one clinical supervision session every three months by a GP clinical supervisor.

Ratio of one senior clinical pharmacist to no more than five junior clinical pharmacists (including peer supervision and support).

Glossary of Educators

Role	Who can they supervise? Where to find a course?
<p>Advanced Practitioner Educator</p>	<p>The AP is a senior member of the clinical team and should be supported to supervise other members of the multi-disciplinary team within their scope of practice.</p> <p>An AP could access a profession specific course to become supervisors/educators before becoming a named educator.</p> <p>The AP can provide day-to-day clinical supervision but not assessment of medical learners in collaboration with a GMC-recognised GP Clinical Supervisor or Educational Supervisor.</p> <p>There is currently no specific programme of learning for an AP supervisor. Recommended guidance can be found here.</p> <p>The AP can carry out the role of the '<i>co-ordinating education supervisor</i>' with three years post AP qualification (some caveats to this please read the Advanced Practice Minimum Standards for Supervision for more info).</p> <p>The AP may also carry out the role of the '<i>associate workplace supervisor</i>'.</p>
<p>Designated Prescribing Practitioner (DPP)</p> <p>(previously designated medical practitioner)</p>	<p>Can supervise any learner completing an independent prescribing or multi-professional prescribing programme.</p> <p>Can be any registered healthcare professional with the necessary prescribing annotation as required by their regulator with at least 3 years' experience.</p> <p>DPPs must be able to demonstrate the competencies within the Royal Pharmaceutical Society Competency Framework (see page 9 teaching and training skills).</p>



	Funded DPP courses can be found here .
GMC-recognised Clinical Supervisor	<p>GP Clinical Supervisors oversee the clinical activity of doctors in post-graduate GP training (Foundation year two doctors and GP speciality trainees in their first or second year – FY2 and GPST 1-2).</p> <p>They may also supervise other multi-professional learners in primary care, including:</p> <ul style="list-style-type: none">• Undergraduate medical students• PAs – students, qualified and preceptees• AHPs – students (will require an AHP from the same profession as well)• Nursing – SNA and RN students (Practice Supervisor role only, will require an NMC registrant as Practice Assessor)• APs – a GP CS can carry out the role of the co-ordinating educational supervisor or an associate workplace supervisor for trainee Advance Practitioners• FCPs – a GP CS can carry out the role of named clinical supervisor for trainee FCPs. Please see the KSS FCP FAQ for further information about FCP training and supervision• Pharmacists – A GP CS can carry out the role of a Practice Supervisor for trainee pharmacists, (will also require a pharmacist as an Educational Supervisor). They can also be the Clinical Supervisor for qualified clinical pharmacists. <p>To become a GP CS, a GP will complete the KSS Primary Care Clinical Supervision course. More information is available here.</p>
GMC-recognised Educational Supervisor (formerly GP trainer)	The GP Educational Supervisor is responsible for the overall education of a GP trainee and has completed an approval process to become an ES (approval paperwork and a meeting with a GP Patch Associate Dean).

	<p>The role includes everything a GMC-recognised Clinical Supervisor is enabled to do, including supervising the same multi-professional learners in primary care.</p> <p>They <i>cannot</i> perform the role of Practice Assessor for pre-registration nurses or Designated Supervisor for pharmacists.</p> <p>A named GP trainer will be approved through the KSS GP School educator pathway (6 days mixed virtual and in person learning), including the optional PG Cert in Strategic Leadership and Multi-Professional Education in Healthcare.</p>
GP Training Programme Directors	<p>Manage and run the General Practice Specialty Training 3-year programme, and support for trainees in need of additional support (the TPD may be from the wider workforce, not solely GPs).</p> <p>See NHS England jobs for vacancies.</p> <p>NHS England employed, usually GP Educational Supervisors with a PG Certificate in Medical Education.</p>
GPs who provide supervision ‘on the day’ (not GMC recognised)	<p>Qualified GP’s that provide ‘on the day’ supervision to multi-professional colleagues working in primary care may wish to formalise their role as an educator, and access learning and development to support them in their role. This may be used as evidence for annual appraisal.</p> <p>The Clinical Supervision for Healthcare Professionals e-learning module is available for free here.</p>
NMC Practice Assessor (PA)	<p>This role may be carried out by RNs and registered NAs (including APs who are RNs).</p> <p>They may also provide supervision but not assessment of AHP’s and pharmacists. With appropriate scope of practice, they may also supervise trainee multi-professional independent prescribers, trainee APs and medical learners in collaboration with a named GMC-recognised GP Clinical Supervisor or Educational Supervisor.</p>



	<p>The Practice Educator and Assessor (PEAP) course has been designed to prepare clinicians to become a Practice Educator, Practice Assessor or a Practice Supervisor – dependant on their profession.</p> <p>Practice Assessors are RNs, registered midwives, or registered NAs or for a prescribing programme a qualified prescriber also. They must be a different person to the Practice Supervisor and on the same part of the register as the learner. They assess and confirm the student’s achievement of practice learning for a placement. They do not need to be physically based or employed in the learning environment. They must have sufficient opportunities to observe the student to inform their decision.</p>
NMC Practice Supervisor (PS)	<p>Can provide supervision but <i>not</i> assessment of nurses, NAs, AHPs and pharmacists, and supervision but not assessment of medical learners in collaboration with a named GMC-recognised GP Clinical Supervisor or Educational Supervisor.</p> <p>The learner and supervisor maybe in a different healthcare profession.</p> <p>The Practice Educator and Assessor (PEAP) course has been designed to prepare clinicians to become a Practice Educator, Practice Assessor or a Practice Supervisor – dependant on their profession.</p> <p>Practice Supervisors can be any registered health and social care professional working in a practice environment (NMC, HCPC or GMC registered for example). A PS should be prepared for the role, but this does not have to a formal preparatory course. Short courses are available at local universities. A PS role is to support and supervise learners in the practice learning environment. Supervision may be indirect (with the supervisor in a different location to the student) with prior agreement from the university.</p>
Pharmacy Designated / Educational Supervisor	<p>Can supervise trainee pharmacists and carry out the practice supervisor role for nurses or AHPs. They may deliver day-to-day supervision (not named supervisor) of medical learners in collaboration with a GMC-recognised GP Clinical Supervisor or Educational Supervisor.</p> <p>The terms Designated Supervisor or Educational Supervisor are used interchangeably (for trainee pharmacists they are designated).</p>



	<p>Educational/Designated Supervisor has overall responsibility for the learner and must be a registered pharmacist. A pharmacy specific online learning package is available. They should be 3 years post registration before carrying out this role and be familiar within the sector. They must work a minimum of 28 hrs in the PCN/practice. This role is not regulated by GPhC so an individual could complete another educator pathway when available.</p> <p>No registers of Designated Supervisors exist.</p> <p>Training for Educational Supervisors including Designated Supervisors can be found here.</p>
Pharmacy Practice Supervisor	<p>Can supervise trainee pharmacists and pharmacy technicians and carry out practice supervisor role for nurses or AHPs. Day-to-day supervision but not the named supervisor of medical learners in collaboration with a GMC-recognised GP clinical supervisor or educational supervisor.</p> <p>Pharmacists can access Pharmacy Educational Supervisor training to support the development of the supervisor role.</p> <p>This role can be carried out by any registered healthcare professional that has completed some supervision training – e.g. a Practice Assessor, PS, CS or ES or a pharmacy specific online learning package is available.</p> <p>Trainee pharmacists must also have a Designated Supervisor.</p>
Practice Educators (AHPs)	<p>Responsible for an AHP learners' education. Also, day-to-day practice/clinical supervision for other members/learners of the practice clinical team.</p> <p>Can supervise pre-registration AHPs, AHP support worker roles, T-levels, supervise but not assess student nurses.</p>



	<p>AHPs can access AHP Practice Educator e-learning to support the development of the educator role. Or complete the Practice Educator and Assessor (PEAP) course which has been designed to prepare clinicians to become a Practice Educator, Practice Assessor or a Practice Supervisor – dependant on their profession.</p> <p>If from a different profession can still provide day-to-day supervision for the AHP with a long arm external profession specific supervisor.</p>
<p>Roadmap Supervisor and Verification (RMSV)</p> <p>GP's and AP's</p>	<p>GPs that have completed a RMSV course can supervise trainee FCPs and trainee APs.</p> <p>APs who have been qualified for 3 years and have completed a RMSV course may carry out the role of co-ordinating Educational Supervisor for trainee APs, although other development is also acceptable. See AP section. (In their first 3 years of being an AP they may carry out role of Associate Supervisor for trainee APs following the RMSV course).</p> <p>All AP's who have completed the RMSV course may supervise trainee FCPs.</p> <p>In addition, the RMSV may carry out day-to-day clinical supervision for the whole multi-professional team.</p> <p>The RMSV was previously a two-day course provided by Primary Care Schools and nationally approved NHS England trainers. RMSV courses are no longer available.</p> <p>From Autumn 2023, the need for practice-based roadmap supervisors to verify stage 1 and 2 of the FCP roadmap is now limited.</p> <p>The FCP roadmap pathway has changed, all new candidates will have their portfolios verified by an educational supervisor in an HEI.</p> <p>More information about the changes to FCP training and education can be found here and here.</p>
<p>Roadmap Supervisor and Verification (RMSV)</p>	<p>A qualified FCP that has completed their 2-day RMSV course can supervise & verify Stage 1 and 2 portfolio routes for trainee FCPs.</p>



FCPs	<p>In addition, the FCP RMSV may carry out day-to-day clinical supervision for the whole multi-professional team including the Associate Supervisor role for AP.</p> <p>From Autumn 2023, the need for practice-based roadmap supervisors to verify stage 1 and 2 of the FCP roadmap is now limited.</p> <p>The FCP roadmap pathway has changed, all new candidates will have their portfolios verified by an educational supervisor in an HEI.</p> <p>RMSV courses are no longer available.</p> <p>More information about the changes to FCP training and education can be found here and here.</p>
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Glossary of Terminology

Acronym	Definition
AA	Academic Assessor – NMC registrant that evaluates and recommends student progression at each part of their programme. An AA is identified and prepared by the Accredited Education Institute.
AP	Advanced Practitioner – may be an AHP, nurse, or pharmacist. More information about advanced practice can be found here .
AHP	Allied Health Professions (HCPC registered professions from 14 roles, including, art therapists, dietitians, drama therapists, music therapists, occupational therapists, operating department practitioners, orthoptists, osteopaths, paramedics, physiotherapists, podiatrists, prosthetists and orthotists, radiographers, speech and language therapists.) The most common AHP professions found in primary care are dieticians, occupational therapists, paramedics, physiotherapists, and podiatrists.
CS	Clinical/Professional Supervision: <i>“regular support from a named senior/experienced clinician/practitioner to promote high clinical standards and develop professional expertise.”</i> NHS England Supervision guidance for primary care network multidisciplinary teams
DPP	Designated Prescribing Practitioner
Enhanced Practitioner	Enhanced Practice is a level of practice within the multi-professional healthcare workforce. Enhanced Practitioners have undergone training, education and development to increase their scope of practice and move beyond novice/competent, but not yet working at an advanced level of practice. More information about Enhanced Practice can be found here .
ES	Educational Supervision: <i>“supports learning and enables learners to achieve proficiency.”</i> NHS England Supervision guidance for primary care network multidisciplinary teams

FCP	First Contact Practitioner
GMC	General Medical Council
GMC-recognised GP Clinical Supervisor	GMC-recognised General Practitioner Clinical Supervisor The doctor is recorded by the GMC as being a Clinical Supervisor and has been recognised by a quality assurance process.
GMC- recognised GP Educational Supervisor	GMC-recognised General Practitioner Educational Supervisor The doctor is recorded by the GMC as being an Educational Supervisor and has been recognised by a quality assurance process.
GPN	General Practice Nurse
HCPC	Health and Care Professions Council
HWBC	Health and Wellbeing Coach
NA	Nursing Associate (sometimes referred to as a Registered Nursing Associate) – works under delegation of an appropriate Registered Nurse or Registered Healthcare Professional.
Named Supervisor	The healthcare professional is identified to the educational provider, the placement provider, and the learner in their capacity as a supervisor/educator/assessor.
NMC	Nursing and Midwifery Council
PA	Physician Associate
PA	Practice Assessor – NMC registrant that assesses the student in practice and confirms achievement of learning objectives. Works with the AA to discuss progress (standards for this role are set by the NMC).



PS	Practice Supervisor – Registered health professional that supports and supervises the student in a practice learning environment (standards for this role are set by the NMC).
RMSV	Roadmap Supervision and Verification – a supervisor course for eligible professionals to supervise Allied Health Professionals through the First Contact Practitioner roadmap. Course delivered until 2022.
RN	Registered Nurse with specific programmes for adult, child, learning disability, or mental health.
SPLW	Social Prescribing Link Worker
Supervision	Can be interpreted in several ways by different professional groups. For the purpose of this guidance document, <i>“Supervision is a process of professional learning and development that enables individuals to reflect on and develop their knowledge, skills and competence, through regular support from another professional.”</i>

Supervision Courses

Courses	Additional Information
FCP Supervisor Course	One day online course for individuals currently engaged in or aspiring to supervise FCP learners in primary care. This course is run by AECC University college for supervisors of FCP learners on their FCP modules. Contact hwalsgrove@aecc.ac.uk
KSS GP Supervisor preparation	Kent, Surrey and Sussex Primary Care Department - Becoming a GP supervisor webpage. Available here: https://kss.hee.nhs.uk/primary-care/gp-trainers/ .
Pharmacist DPP and Pharmacist Designated Supervisor/Educational Supervisor	ProPharmace supervisor training programmes (funded course). Available here: https://propharmace.com/est/
Pharmacy Educational Supervisor training	elearning for healthcare. Pharmacy educational supervisor training (free course). Available here: https://www.e-lfh.org.uk/programmes/pharmacy-educational-supervisor-training/
Practice Educator and Assessor preparation	<p>elearning for healthcare. Practice educator and assessor preparation (PEAP programme - free course). Available here: https://www.e-lfh.org.uk/programmes/practice-educator-and-assessor-preparation-peap/</p> <p>The Open University Practice supervision and assessment in nursing (free course). Available here: https://www.open.edu/openlearn/health-sports-psychology/practice-supervision-and-assessment-nursing/content-section-0?active-tab=description-tab</p> <p>University of Brighton Practice assessor and practice supervisor courses and updates (free courses). https://www.ticketsource.co.uk/university-of-brighton-school-of-health-sciences</p>



SE AHP Practice Educator training programme	NHS England Learning Hub. NHS England (free course). Available here: https://learninghub.nhs.uk/catalogue/ahppracticeeducatortraining
Other useful courses	Clinical Supervision for Healthcare Professionals e-learning module (free course). Available here: https://learninghub.nhs.uk/Resource/9647/Item Principles of Workplace Supervision in Healthcare. Available here: https://www.sgul.ac.uk/study/professional-education/short-courses/Principles-of-Workplace-Supervision-in-Healthcare Advancing Clinical Education and Supervision. Available here: https://www.sgul.ac.uk/study/courses/advanced-clinical-practice#modules

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Acknowledgements

The Guide to Supervision in KSS Primary Care was developed and produced with the help of the following stakeholders. We would like to thank them all for their expertise and contribution and passion to support learners in practice.

Advanced Practice	Heather Nisbet	SE Faculty of Advancing Practice Supervision and Assessment Lead
	Karen Swift	SE Faculty of Advancing Practice Training Programme Lead for Primary Care, NHS England
Allied Health Professionals	Dr Channine Clarke	Head of Practice Learning and Development, School of Sport and Health Sciences University of Brighton
	Rebecca Tyrell	Head of AHP SE
First Contact Practitioners	Rebecca Tyrell	National AHP Primary Care Advisor
General Practitioners and Foundation Doctors	Dr Liz Norris	Head of GP School – NHS England KSS
Personalised Care	Amanda Sangster	Delivery Partner NHS England South East (v1.0)
Pharmacy	Pam Bahia	Pharmacy Programme Facilitator London and KSS Pharmacy
Physician Associates	Dr Natalie King	Head of KSS School of Physician Associates
	Joanne Piper	Programme Manager KSS School of Physician Associates
	Sarah Vigor	Physician Associate Ambassador for KSS



Medical Students	Dr Catherine Neden Dr Tom Levett	Lead for General Practice and Community Education Kent and Medway Medical School Director of Undergraduate teaching and Learning Brighton and Sussex Medical School
Nursing	Dr Karen Harrison-White	Programme Lead Nursing NHS England South East