



Preceptee

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What has the impact of preceptorship been on you personally?

The KGH NHS preceptorship programme offered robust sessions that are building me as a leader and raising my confidence as a nurse. As part of the programme, I have recently completed part 1 of practice supervisor training, and I am on my way to completion of part two. The program provided an opportunity for me to have a self-directed development programme. It created a structure for continuous learning and promoted my desire to prioritise learning.

In July 2021, we had a virtual session on anticoagulation and venous thromboembolism (VTE). The presentation focused on VTE risk assessment and completion, VTE audit on perfect ward, hospital-associated thrombosis (HAT) process, and anticoagulation: direct oral anticoagulants (DOACs) prescribing and warfarin discharges. In August 2021, the practice development (PD) team sent the Powerpoint presentation from the session and a workbook. This 21-page anticoagulation workbook included pre-test questions, tasks, and reflective practice. I printed it off and, at first, I scanned through the pages. What I immediately observed was that almost all aspects of my clinical responsibilities in anticoagulation were captured in the workbook with accompanying tasks that I can complete to stimulate the need for personal findings.

I began with consultation from the Powerpoint document and then I started engaging colleagues (nurses), seniors and doctors as I read and completed the tasks. I completed the tasks in October 2021; my ward manager reviewed the workbook with me and was happy to sign the workbook. Since then, my confidence around anticoagulation has increased significantly.

On an occasion where a new patient was admitted and prescribed enoxaparin as prophylaxis, I advised the prescriber on the dose as per the weight of the patient, which was below 50kg, hence it was changed to 20mg once a day instead of 40mg once a day.

I ensure routine INR (international normalised ratio) for patients under my care who take warfarin, and follow up with doctors to fill out the dosing on the warfarin card. I ensure referral process to anticoagulation service is completed upon discharge of patients on warfarin. I also ensure VTE risk assessment is completed for my patients and discuss any changes necessary to hold an active anticoagulation therapy (for example, in the case of any bleeding).



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What advice would you give a new preceptee?

The trust has built a bridge for all new employees to move from low level or non-competence to high competence through the preceptorship programme.

One thing you should do is ensure you follow through the programme, as every session was planned and structured such that the end of the bridge will produce a model of the NHS core values.

Full and undivided attention to your preceptorship sessions will impact on your competence, confidence, compliance and care values.



Preceptorship is the ecosystem for newly qualified and internationally educated nurses; your learning and development as a nurse depends on it.



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