

# A realist synthesis of preceptorship for Allied Health Professionals: What works, for whom, and in what contexts

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## Introduction

This study used a realist lens on preceptorship to generate evidence of 'what works', for whom, and in what contexts for Allied Health Professionals (AHPs). Preceptorship has been shown to have positive outcomes for nurses and midwives, but evidence is limited for AHPs.

This realist synthesis provides a theory-driven understanding of how preceptorship works for AHPs

## Aims

1. Develop a conceptual framework for AHP preceptorship
2. Synthesise different forms of evidence about AHP preceptorship
3. Establish a programme theory for AHP preceptorship to underpin a AHP preceptorship framework and principles
4. Engage stakeholders in resolving implementation challenges

## Methods

Realist synthesis is a theory-driven explanation of how interventions work – in this case preceptorship for AHPs – in different contexts.

The project consisted of four iterative phases:

1. Conceptual framework development
2. Development of plausible explanations of how AHP preceptorship works
3. Testing these explanations across different types of evidence to develop a programme theory
4. Knowledge mobilisation and market testing

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## What is preceptorship?

Preceptorship is a period of structured support provided to health and care workers at key moments of career transition, such as entering the workforce for the first time, to give them confidence to act as an autonomous practitioner

## Findings

We generated a programme theory of seven elements - Contexts-Mechanisms-Outcomes (CMOs):

1. Facilitating multi-professional learning and collaboration within preceptorship programmes
2. Maintaining professional identity and visibility within preceptorship
3. Embedding preceptorship within wider professional networks to facilitate access for all
4. Building on employee/registrants' individual development needs to ensure situational and professional relevance, better engagement and impact
5. A clear structure which demonstrates organisational and system commitment to AHPs as both individuals and professionals
6. Embedding preceptorship within organisational learning cultures which build loyalty to organisations and positive organisational reputations
7. Integrating overarching reference points, including the four pillars of practice, helping AHPs to 'connect' their preceptorship learning and generate a more seamless experience of professional development

## Conclusions

An appropriate mix of uni- and multi-professional elements enable AHPs to develop their confidence within new practice contexts, and within their scope of professional practice. Both organisational commitment to learning, and system-wide coordination is required to ensure that all allied health professions can benefit from preceptorship. The seven CMO elements of the emerging programme theory were translated into five policy principles of AHP preceptorship.

## AHP preceptorship principles

1. Organisational culture & preceptorship
2. Quality & oversight of preceptorship
3. Preceptee empowerment
4. Preceptor role
5. Delivering preceptorship programmes