



Return to practice

Supervisor handbook

Acknowledgments

Author: Royal College of Occupational Therapists (RCOT)

Writer: Henny Pearmain

Date of publication: 2023

Thank you to Health Education England (HEE) for support in writing this guide.

Thank you

The Royal College of Occupational Therapists (RCOT) would like to thank you for supporting occupational therapists (OTs) who want to return to practice.

Whether you're part of an organisation or an independent practitioner, by providing supervision to returners you can help to recruit, develop and retain a motivated OT workforce, building capacity and capability to effectively deliver current and future services. It will also help you to further develop your knowledge and skills as you support and encourage them back to your shared profession of choice.

This handbook provides some information and resources to help you supervise a returner. You will also find some signposts for further material should you be interested.

If we can be of any further assistance, please don't hesitate to contact our Professional Practice Enquiries Service. We would be happy to discuss your returning to practice plans and answer any questions you may have:

professional.enquiries@rcot.co.uk or 020 3141 4630

The service is open Monday - Friday from 9am-5pm

What is a return to practice programme?

A return to practice programme is an organised process that enables OTs to regain their professional registration with the Health and Care Professions Council (HCPC), to return to practice. It provides them with opportunities and support in updating their professional skills and knowledge and regaining their confidence through some or all the following:

- the support of a named supervisor
- a supervised practice placement
- learning opportunities and resources
- networking opportunities
- the possibility of employment if vacancies exist; and
- funding in some circumstances.

Some health and social care organisations and universities are already providing organised programmes, of which you may be a part. Alternatively, you may be an independent practitioner who has been asked for support by a returner.

Why should you support returners?

Investment in the current and future OT workforce is vital. You may be concerned that you don't have the capacity or time to supervise a returner, but consider the accruing benefits:

- You'll be developing your own supervision, teaching and leadership skills as part of your professional career.
- You'll be able to keep your knowledge and skills up to date as a returner seeks information from you.
- You can be part of developing a learning culture within your workplace, gaining a positive reputation for supporting and promoting safe, informed and excellent practice.
- If your service has vacancies, supporting returners has been shown to improve recruitment and retention¹.
- The returners on placement are already fully qualified, bringing with them life experience. They are motivated to work and to learn from you. They need your support to update their skills and knowledge and regain their confidence.

What does the returner need to do?

As you will be aware, an OT needs to be registered with the HCPC to practise in the UK. HCPC require returners to update their knowledge and skills before they apply to register².

The returner must complete a certain number of days of updating, depending on how long they have been away from practice. This can be done through any combination of a supervised practice placement, private study and formal study. The only stipulations that HCPC make are that private study must not make up more than half the period and that it all must be carried out within two years before they apply for registration.

The amount of time spent updating is as follows:

- **0 to 2 years out of practice** – no requirements
- **2 to 5 years out of practice** – 30 days of updating
- **5 or more years out of practice** – 60 days of updating

You can download the HCPC return to practice information from their website:

<https://www.hcpc-uk.org/>

Although the HCPC requirements are described as minimum and flexible, we would suggest that there is much more to returning to practice, especially in regaining confidence. We know that returners often find it difficult to navigate the process when they haven't been in practice for some time. This is why your support is vital.

Can you be a supervisor or a supporting colleague?

The HCPC state that any professional providing supervision to a returner, or who is a counter-signatory **needs to have been on the relevant section of the HCPC Register for at least the previous three years and not been subject to any fitness to practise proceedings or sanctions** (such as a caution or conditions of practice). On receipt of the returner's application forms at the end of the updating, HCPC will confirm the named person is on their Register.

As the supervisor, **you should only supervise activities which are within your own scope of practice and level of competency**. This is so that you can provide relevant input and guidance, and make sure that both you and the returner are practising safely and effectively.

The HCPC recognises that effective supervision has multiple benefits for both the supervisee and the supervisor³. It also states that supervision can have significant benefits for the wider service and those who access the service. If you don't have experience in supervision, seek some training for yourself. Supervision is a valuable skill which, once developed, repays the investment many times in terms of providing support and development. In the process of providing supervision, you'll be continually challenged to maintain and update your professional/clinical knowledge, so those who access the service are ensured a safe, effective, ethical and excellent service.

We encourage all returners to have the support of a fellow OT even if they are not completing a placement. This might be a former work or university colleague. If this is your case, your role might be facilitating and encouraging the returner through the process, helping them to recognise their learning needs, directing them to learning resources and enabling them to reflect upon their learning. You'll still need to meet the HCPC requirements, only providing direction and advice that is within your level of experience and competency.

For more information, please have a look at RCOT's current guidance on supervision⁴. You may also find the RCOT web page on resources for practice educators useful. Please note that this information is only accessible for RCOT members.

What do you need to know before you start?

Make sure you fully understand the HCPC requirements for a returner and ensure that you meet their requirements to be a supervisor.

If you're part of an organisation that is developing an ongoing return to practice programme, ask to be involved in the planning. Everyone involved in the development and running of the programme needs to understand the process and requirements for occupational therapy returners.

Make links with your learning and development services if you have them. They may be able to give advice and information on formal learning opportunities. You might consider arranging learning opportunities across organisations and sectors, providing a broader experience for the returners. Consider how this can be done safely in terms of contractual and insurance cover. Your Human Resources should be able to advise you. Take advantage of any university links your organisation has or consider if this is something that could be developed.

If you're offering support not connected to a practice placement, what network colleagues do you have that your returner might be able to visit? If your colleague meets the HCPC criteria and is willing to offer supervision, any time spent with them counts as supervised placement time. If only observation is available and there is no formal arrangement for supervision in place, HCPC treats the time spent as private study rather than supervised practice.ⁱⁱ

Gather some key occupational therapy resources, such as:

HCPC:

- Standards of conduct, performance and ethics (HCPC 2016)⁶
- Standards of proficiency for occupational therapists (HCPC 2013)⁷

RCOT:

- Professional standards for occupational therapy practice, conduct and ethics (RCOT 2021)⁸
- Career development framework: Guiding principles for occupational therapy (RCOT 2021)⁹
- Preceptorship frameworks or local preceptorship material.
- Publications related to any new developments within the profession, e.g., texts and journal articles.

These are useful for checking what knowledge and skills, or professional qualities (professionalism) your returner might need to update.

If you (as an occupational therapist) or the returner are not already members of RCOT, we would encourage you both to join. This will give you access to the full range of RCOT publications, resources and benefits, including liability insurance.

Look for any local or national return to practice information for your UK country of residence. Although they'll abide by the HCPC requirements, some nations have further support and funding available to assist the returner and the organisation that provides a supervised placement. When you supervise a returner, make sure they have read the relevant country information and have registered for assistance where available.

Further information is available here:

England:

Health Education England (HEE) have set up a return to practice programme designed to provide additional support alongside the HCPC return to practice guidance by offering clinical, academic, and financial support to returners. It has several acceptance criteria.

<https://www.hee.nhs.uk/our-work/allied-health-professions/return-practice-allied-health-professionals-healthcare-scientists-practising-psychologists>

Northern Ireland:

In Northern Ireland enquiries should be made locally. Trusts may take requests on a case-by-case basis and try to support where possible.

Wales:

In Wales the updating arrangements are managed individually by Heads of Departments within Health Boards/Trusts.

<https://heiw.nhs.wales/careers/education-and-training/return-to-practice/return-to-practice-for-allied-health-professionals-and-health-care-scientists/>

Scotland:

NHS Scotland Careers Return to Practice website page:

<https://www.careers.nhs.scot/ahp-return-to-practice/>

What status can the returner have?

The returner cannot call themselves an 'occupational therapist' until they are on the HCPC register, but they may be identified as an OT returner or an OT assistant, depending on their route of return. A returner can be given an honorary/voluntary contract or may be recruited to a band 3 or 4 role. This can be through a temporary staffing service/bank if your organisation has one. The returner will be required to meet all the usual expectations for those working for your organisation, abiding by policies, maintaining professional behaviour etc. The returner-supervisor relationship remains the same irrespective of voluntary or employed status.

Any time worked in the context of returning to practice, whether paid or voluntarily, may be included in the returner's total placement hours.

Can a placement be done as flexible working?

Flexible working placements, such as part-time or flexi-time options may enable a returner to manage the demands of the placement and home/personal commitments, especially when home-life may involve caring for others. The returner can complete their planned placement hours more gradually, so long as they're done within the two years before applying for registration.

Will a returner need safety checks and an induction?

In any setting, all returners will require safety checks before they start their placement (DBS or equivalent). You may want to know how long your organisation takes to process a safety check so that you and the returner can take this into account when planning.

The returner will also need to complete your organisation's induction programme. The time taken to complete this may be included in the returner's total placement hours.

How can you support a returner's health and wellbeing?

Everyone should have health and wellbeing support. This is important for returners who are coming back into a demanding work environment, perhaps when their confidence is low. As a supervisor, an initial wellbeing interview may be part of your role. Ensure that you comply with any local health and wellbeing requirements and make sure the returner is aware of any support available in your organisation.

It's important that an individual is not excluded or discriminated against if they have health and wellbeing needs. As with any member of staff, these need to be sensitively discussed and accommodated as much as reasonably possible, with additional support or flexibility provided.

The returner does not have to declare any health conditions to HCPC if it doesn't affect their practice or if they're sure they can adapt, limit, or stop their practice as needed to remain safe and effective.

What supervision do you need to provide?

The purpose of the return to practice activity is for the returner to update their skills and knowledge and to gain confidence in the practice of OT. They have already achieved their professional qualification. Most returners will have previously worked for several years so will bring considerable experience with them.

Together with the returner, you can identify the areas of OT which they need to update and the best way to go about this – whether through formal study, private study or in practice. You may be able to guide them to learning opportunities and resources or provide practical experience. You might consider partnering with another service or organisation to widen the learning opportunities for the returner.

The documents included in this guide can be used as checklists, with the returner assessing themselves against the professional expectations. They should also come with some ideas of the areas of learning they need to complete. You might find it useful to refer to the same publications as the returner goes through their placement, to demonstrate their progress. If your organisation has a preceptorship scheme, you may also find any preceptorship resources useful.

Although the returner is responsible for deciding if the updating is enough, as you get to know them, you could provide some feedback. Are there areas that you consider they need to update or develop further?

What level of autonomy can a returner have?

The intensity of supervision will need to be tailored to individual needs, but it can be assumed that more will be required initially. Your initial role is to work with the returner to identify their level of ability, knowledge and awareness and thereby any learning needed to regain their autonomy. HCPC believe that the level of supervision given is best decided between you and the returner, based on their learning needs.ⁱⁱ

As the returner updates their skills and knowledge, you can withdraw the close supervision and delegate increasingly complex tasks for them to carry out. Your role is to enable them to regain their competence and confidence to practise autonomously, safely and effectively.

Consider both yourself and the returner in the light of Section 6 of the RCOT *Professional Standards for Occupational Therapy Practice, Conduct and Ethics* (RCOT 2021)^{vi} and Section 4 of the HCPC *Standards of conduct, performance and ethics* (HCPC 2016)^{iv} to understand the relationship between supervision, delegation and competence.

A practitioner:

- May ONLY provide services and use techniques for which they are qualified by their professional education, ongoing learning and/or experience.
- These MUST be within their professional competence, appropriate to the needs of those who access the service and relate to their terms of employment; and
- They MUST have sufficient knowledge, skills and experience to make reliable professional judgements, suitable to their level of responsibility and scope of practice.

Please see section 6.5 of the RCOT professional standards regarding delegation and supervisory responsibilities.^{vi} As a supervisor you need to be sure that the supervisee is competent to perform any task that you delegate to them.

Record keeping

Record keeping should be viewed as any other clinical responsibility. If you delegate the task of record keeping, the same principles apply. It's something that can be done by the returner under supervision initially and fully delegated when they are confident and able to carry out the task appropriately.

The signing of records is a legal requirement. The returner must identify themselves and their role as OT returner/OT assistant in the records. You don't need to countersign the returner's records unless your local policy requires it.

The organisation should provide any system and necessary data protection training available and set up access to records, e.g., passwords and digital signatures.

For further information please see RCOT's current guidance on [keeping records](#)¹⁰.

Countersigning the returner's HCPC forms

When the returner applies to register with HCPC, they need to complete several forms detailing their updating. The returner self-declares that they've fulfilled the HCPC return to practice requirements. HCPC will decide if the returner can go back onto the register based on the information provided.ⁱⁱ A registered OT (who meets the HCPC criteria detailed on page 4) needs to countersign the forms.

Although as practice placement supervisor, you're likely to be the counter signatory on all the forms when the period of updating is complete, you don't have to be. The only one you are required to sign is the practice placement form, when you confirm that the person has completed the period of supervised practice that they've declared. As a signatory for the forms relating to formal and private study, you can ask to see course certificates or to see study records.

The forms are not for confirming that the returner is fit to practise.

They are just to confirm, as far as can be known, that the information given about the updating is correct, including the number of days completed. Your signature doesn't express that the returner is fit to practise, nor would you be held responsible should fitness to practise be brought into question later.

The HCPC will consider the information that is sent to them. They may contact the returner or the organisations /individuals providing a placement if they need further information or to verify the number of days completed.

They may also contact any organisation that provided formal study, to confirm attendance and completion of the course.

A returner who struggles

Unfortunately, sometimes returners do struggle maybe in confidence or capability, or with the demands of managing both work and home circumstances. If you have a good relationship with your returner, try to discuss the situation and find a way to resolve any problems. Look for any means of support provided by your organisation. Seek advice for yourself if you need it. You might consider offering to extend the placement period if you think this would help. If there has been a breakdown in the supervisory relationship could your organisation offer an alternative supervisor or location?

Although it is not your role to confirm the returner's competence or fitness to practise with HCPC, you can highlight to the returner when you consider more learning is required. If you continue to have concerns about the returner, HCPC has two suggestions:

- You can explain your concerns about signing the form and may help them to plan additional updating activities.
- You may sign the form to confirm the updating they have done, and then raise a fitness to practise concern with HCPC.ⁱⁱ

Serious concerns about the returner's conduct, competence, health, or character that suggest they are unfit or unsafe to practise their profession without restriction, or at all, are likely to be concerns that raise a question about their fitness to practise. You may need to consider contacting HCPC in such a case. HCPC will consider this information should the returner apply for registration.

In rare cases, a returner's lack of skills or professional demeanour may make it necessary for the placement provider to terminate any contract with them, in which case the returner will be unable to meet the HCPC requirements.

Recording the outcomes

You may wish to consider developing a feedback form for your returner/s to complete when they finish their return to practice requirements. Based on this you can learn from experience and further improve what you offer. If you've supported several returners through the process, you can, with their permission, begin to build a library of peoples' stories, perhaps through short video clips. These can be used promotionally to demonstrate the positive experiences of past returners with you or your organisation.

Success factors for an organised return to practice programme

- make sure everyone who is involved in any way has a full understanding of the return to practice process and requirements
- involve all the necessary people from the beginning. This is an organisational investment
- be flexible
- be inclusive and accessible to all
- provide supervision through well trained supervisors.

Funding

Depending on your location, you may be involved in applying for funding for the returner. Each country within the UK has different funding availability. Ensure returners are aware of this support.

England

Please see the information available here:

<https://www.hee.nhs.uk/our-work/allied-health-professions/resources>

HEE provides some funding for out-of-pocket expenses (£800), courses etc for AHPs who join their returners programme. This is limited to former HCPC registrants who live in England and plan to work in England once returned to the HCPC register. They will also fund organisations that host a returner (£500).

For more information, please contact: R2PAHP-HCS@hee.nhs.uk

Northern Ireland

In Northern Ireland enquiries should be made locally. Trusts may take requests on a case-by-case basis and try to support them where possible.

Scotland

Please contact: ahp.practice.ed@nes.scot.nhs.uk

NHS Scotland Careers Return to Practice website page:

<https://www.careers.nhs.scot/ahp-return-to-practice/>

Wales

Please see the information available here: [Return to practice for allied health professionals and health care scientists - HEIW \(nhs.wales\)](#)

A bursary of £1,000 is available to each returner, but there are several conditions. Means-tested assistance with childcare costs incurred whilst attending clinical placements and refresher training can also be claimed.

If you have any queries or need further explanation then please contact your programme lead if you are already in situ, or email etfinance.nwssp@wales.nhs.uk or [NWSSP](#). WEDSEdCommissioning@wales.nhs.uk.

In summary

Supporting returners to occupational therapy practice is not as difficult as you may think. RCOT can signpost you to resources and support to assist you in boosting the recruitment and retention of occupational therapists.

References

- ¹ HEE (2020) Return to practice: Supporting AHP workforce supply across systems webinar <https://www.hee.nhs.uk/our-work/return-practice-allied-health-professionals-healthcare-scientists/resources>
- ² Health & Care Professions Council (2017) Returning to practice: Information about our requirements for professionals returning to practice. London: HCPC. Available at: <https://www.hcpc-uk.org/globalassets/resources/guidance/returning-to-practice.pdf>
- ³ Health & Care Professions Council (2021) The benefits and outcomes of effective supervision. London: HCPC. Available at: <https://www.hcpc-uk.org/standards/meeting-our-standards/supervision-leadership-and-culture/supervision/the-benefits-and-outcomes-of-effective-supervision/#:~:text=Supervision%20can%20also%20help%20to,of%20care%20and%20service%20outcomes.&text=Work%20in%20health%20and%20social,your%20own%20health%20and%20wellbeing>
- ⁴ College of Occupational Therapists (2015) Supervision: Guidance for occupational therapists and their managers. London: COT. Available at: <https://www.rcot.co.uk/node/3916>
- ⁵ Royal College of Occupational Therapists (2022) Resources for practice educators webpage. London: RCOT. Available at: <https://www.rcot.co.uk/resources-practice-educators>
- ⁶ Health & Care Professions Council (2016) Standards of conduct, performance and ethics. London: HCPC. Available at: <https://www.hcpc-uk.org/globalassets/resources/standards/standards-of-conduct-performance-and-ethics.pdf>
- ⁷ Health & Care Professions Council (2013) Standards of proficiency – occupational therapists. London: HCPC. Available at: <https://www.hcpc-uk.org/globalassets/resources/standards/standards-of-proficiency---occupational-therapists.pdf?v=637018071160000000>
- ⁸ Royal College of Occupational Therapists (2021) Professional standards for occupational therapy practice, conduct and ethics. London: RCOT. Available at: [Professional standards for occupational therapy practice, conduct and ethics - RCOT](#)
- ⁹ Royal College of Occupational Therapists (2021) Career development framework: Guiding principles for occupational therapy 2nd ed. London: RCOT. Available at: <https://www.rcot.co.uk/publications/career/development/framework>
- ¹⁰ Royal College of Occupational Therapists (2018) Keeping records. Guidance for occupational therapists. 4th ed. London: RCOT.