

Reviewing the roles of nurses and health care assistants in general practice

Paul Vaughan and colleagues describe the outcomes of a rapid review of general practice nurse and healthcare assistant roles in primary care

The Working in Partnership Programme (WiPP), which supports general practice with capacity-building resources and strategies, commissioned a rapid review to explore what is known about the impact of general practice nurses (GPNs) and healthcare assistants (HCAs) in general practice to inform the development of the WiPP GPN and HCA toolkits (Box 1).

These complimentary toolkits (Table 1) are intended to help practices, nurses and HCAs introduce, develop and optimise the role of GPNs and HCAs. They provide answers to some of the questions that the review raises and attempt to fill some of the gaps between what is needed by practices and their staff, and what is available from existing resources.

Results of the review

The rapid review has provided a comprehensive insight into a complex area of change in general practice workforce and skill mix.

Much of the change has been led through innovation in general practice that is then spread through local networks. This 'bottom up' approach has led to significant variation in the development of supporting structures.

The review has provided some insight into what has emerged, what exists to support current practice, and what is needed to move forward. Specifically the review helps us to see:

- ▶ the range and depth of roles undertaken by GPNs and HCAs, and how these can be enhanced and developed
- ▶ what can be done to support practices, GPNs and HCAs through education and training
- ▶ best practice in the recruitment, employment and integration of GPNs and HCAs
- ▶ the resources needed to make the most of the contribution of GPNs and HCAs
- ▶ the views of patients/other people on the developing roles of GPNs and HCAs
- ▶ the impact and potential future impact of GPNs and HCAs in general practice
- ▶ what we can learn from the work of others.

GPNs and HCAs

General practice nurses and HCAs perform a range of clinical and non-clinical roles which have evolved over time to meet the needs of practices and to match the competencies of individuals.

The review found that the delegation of tasks to HCAs is poorly understood. If left unad-

Box 1. How the review was undertaken

The review looked for relevant information from a range of publications, including:

- ▶ academic literature - peer reviewed journals
- ▶ 'grey' literature – editorial/news style publications
- ▶ related policy documents – bulletins and publications
- ▶ practice examples – submitted to WiPP as part of the GPN and HCA initiatives.

Working with the WiPP GPN and HCA project teams the review team identified 19 relevant domains, which provided a focus for the search and a framework for the review. Searching was conducted using a mixture of manual searching of publications and bulletins together with some electronic searches of relevant databases.

Focus for the review

The review focused on seven broad categories:

- ▶ **The nature of the role:** what the clinical and non-clinical roles involve and how these are managed?
- ▶ **Training and development:** what sources exist

to support practices and individuals, how these are used, the experience of stakeholders and opportunities for career development?

- ▶ **Resources:** what resources do practices make available to support the work of GPNs and HCAs?
- ▶ **Employment:** what has been done to support the recruitment, induction and integration of GPNs and HCAs in general practice?
- ▶ **Lay perspectives:** What has been the response of patients and lay stakeholders to the development and implementation of new GPN and HCA roles in general practice?
- ▶ **Impact:** what can be said about the impact of GPNs and HCAs in general practice?
- ▶ **Evaluation:** what has been done to evaluate the impact of GPN and HCA roles in general practice and what does this tell us?

These were further refined into 19 individual domains.

This review was conducted by staff from the department of primary care at Staffordshire University between July and September 2005.

Keywords

- ▶ health care assistants
- ▶ training
- ▶ skill mix

dressed, this could limit practices' uptake of HCA posts. GPs and nurses who delegate tasks to HCAs need be clear about what accountability passes to the HCA and what the nurse or GP remains accountable for.

In 2005 the RCN published guidance to help clarify accountability issues for practices (Box 2).

The evolution of GPN roles, and more recently HCAs, in general practice has resulted in a varied list of tasks and responsibilities.

Tasks that might previously have been delegated by a GP to a nurse are now more effectively managed by a team comprising a nurse and an HCA who divide the task so that nurses can concentrate on the more complex elements while HCAs deal with the routine aspects of monitoring, recording and facilities. As a result general practice teams have become more diverse and efficient at delivering care to their patients.

Toolkit resource

Unit 1 of the GPN and HCA toolkits provide an introduction to the roles. Unit 3 goes on to explore the competencies required of GPNs or HCAs to fulfil that role.

Support

The review highlighted the crucial role that education and training plays in enabling changes in the workforce to take place.

PCTs, practices and education providers (EPs) need to work together to map local provision, identify gaps and create networks to support staff and practices.

The requirement for training may not always be best met by an outsider, and the review highlighted that a considerable amount of training is provided in-house by practices:

- ▶ Training is a key element to getting the best from GPNs and HCAs. HCAs often have no formal training in health care; this does not mean that they cannot be an effective member of the practice team.
- ▶ There are few formal courses to help HCAs make the transition into general practice nursing. However PCTs and practices can work with EPs to develop tailored courses which increase HCAs' confidence to undertake a wider range of tasks.
- ▶ Sources of training vary considerably, which makes it difficult for practices, GPNs and HCAs to find the most appropriate resource. There is a role for PCTs and practices to work with local EPs to map local provision.
- ▶ HCAs will need to be able to access a local

NVQ network and some PCTs have been active in setting these up where they did not exist. This will give qualified staff the opportunity to act as mentors, while those with an interest in education and training can develop a role in NVQ assessment.

- ▶ PCTs should encourage the development of local networks to share good practice in the development of GPNs and HCAs.

Toolkit resource

Education and professional development for GPNs is explored in Unit 4 of the GPN toolkit. The HCA toolkit takes an in-depth look at education and training in Unit 4 and then goes on to look at professional development in Unit 5.

GPN and HCA contribution

The review found that providing the right resources in terms of facilities, space, equipment and IT were all important to maximise the potential contribution of GPNs and HCAs.

Practices intending to recruit or develop HCAs and GPNs need to ensure they have the physical capacity at the right time to accommodate the new clinics and sessions that will inevitably follow. Providing access to IT and the practice records system also needs to be backed up with training to help GPNs and HCAs get the most from the IT resources they use.

Local resources, such as health libraries, vary, and the review found that it is more difficult for nurses in general practice than those in secondary care to access these kinds of resources.

This highlights a potential role for those involved in workforce development to work with

Box 2. RCN guidance: accountability and the HCA role

- ▶ 'There should be a formal arrangement for a health care professional to supervise the HCA on a regular basis. Supervision, including observation should include time built into the workload. All HCAs should be aware that they are accountable to the patient for any errors they may make, through civil law, and to their employer, through their contract.
- ▶ 'The GPN, or other professional, is however accountable for the appropriate delegation of any task or duty. The HCA cannot be professionally accountable as they are currently unregulated, apart from in social care settings' (RCN 2005).

Table 1. An overview of the GPN and HCA toolkits

General practice nursing toolkit	Healthcare assistant toolkit
<p>The GPN toolkit provides GPNs, employers, PCTs, patients and education providers with a resource to improve practice.</p> <p>The toolkit is focused on:</p> <ul style="list-style-type: none"> ▶ employment practice ▶ education and professional development ▶ competence ▶ integration with the wider community healthcare workforce ▶ career development ▶ quality improvement and evaluating practice. <p>Each section includes tools that can be downloaded to provide practical help towards improving practice. You can access the toolkit at www.wipp.nhs.uk/gpn-toolkit</p>	<p>The HCA toolkit draws together resources that support practices to navigate the recruitment, education and training, personal development, competence assessment and integration of the HCA role.</p> <p>It is intended to minimise the effort needed to take forward the recruitment and optimisation of the HCA role.</p> <p>Each unit deals with a different aspect of developing the role of the HCA in general practice. You can access the toolkit at www.wipp.nhs.uk/hca-toolkit</p> <p>There are also a host of other resources to complement the toolkit, for example patient information leaflets and posters, booklets on accountability and delegation, delegation tool, resources on HCAs and the administration of the influenza vaccination which you will find at www.wipp.nhs.uk/262.php</p>

PCTs and practices to improve equality of access and to encourage nurses and HCAs to make use of these resources.

Toolkit resource

Integration of the GPN and HCA role into the work of the practice and community team is explored in Unit 7 of both toolkits.

Recruitment, employment, integration

Keeping abreast of best practice in employment is difficult with legislation changes and reform in the NHS, for example *Agenda for Change*.

It is not surprising, therefore, that the review found that processes and documentation used in the recruitment and employment of staff in general practice were often out of date or could be improved. The review highlighted resources available to help practices, including:

- ▶ PCTs that have developed job descriptions, adverts and induction guides
- ▶ Acas, which provides guides and template documents for employers and employees through its website
- ▶ Local employment centres which can support employees and employers to navigate the recruitment process
- ▶ Resources like the HCA and GPN toolkits which provide example job descriptions, appraisal documents and tips on how to keep these up to date.

Skill mix changes can help general practices make the best use of the resources they have available to ensure that they continue to deliver high quality care in a world of diminishing resources and increased workload. They can also provide opportunities for teams to diversify the range of services they provide.

Toolkit resource

Unit 2 of the GPN and HCA toolkit provides resources and advice to support good practice in the recruitment and employment.

Patients/public view

The review looked at patients' perceptions of the HCA role specifically and established

that they find it difficult to distinguish between GPNs and HCAs.

Patients are happy to be seen by an HCA, but like to know that a nurse or GP has provided some input into their care.

There is an important role for practices, GPs and nurses to inform patients in an open and transparent way about the work of HCAs and the role that they play in the practice.

Toolkit resource

Both the GPN and HCA toolkits provide resources to help patients understand the role of the HCA and to help practices, GPNs and HCAs to explain their role to patients.

Impact and potential future impact

The review found that:

- ▶ HCAs have improved access in general practice, helping practices to meet their 24/48 hour access targets
- ▶ Nurses in general practice tend to have longer consultations with improved patient satisfaction compared with GPs
- ▶ In 2001, one in five nurses on the NMC register was aged over 50.

HCAs and GPNs are having an impact on the work of general practices, and at a time when their role is expanding the NHS is facing the challenge of dealing with an ageing workforce.

Primary care trusts, practices and EPs will have a role in making the most of the opportunities to use HCAs to provide new capacity while opening up new pathways into nursing.

Innovative practices continue to look for new ways to use the skills and qualities of GPNs and HCAs. This is likely to lead to a widening of their roles into areas hitherto considered the exclusive domain of GPs and nurses. However, the core role of GPNs and HCAs remains tightly focused and consistent, providing support and capacity to meet the needs and demands of patients.

Learning from the work of others

The review includes an in-depth evaluation of the work of a number of innovative practices that had applied for WiPP pilot site status.

Best practice examples have been prepared in case study format to provide prac-

tices and PCTs with inspiration, and ideas for taking forward the development of the GPN and HCA role locally.

Toolkit resource

The GPN and HCA toolkits include case studies to illustrate the impact of their roles on the work of practices.

Conclusion

This rapid review has given a snapshot into the roles of GPNs and HCAs in general practice in England and highlighted the exciting and innovative work taking place to enhance patient care.

The resources developed by WiPP build on this existing work and, where appropriate, create new resources to support and enable general practices to meet the demands of an ever changing NHS.

The toolkits offer support, guidance, advice and best practice examples for practices and PCTs to use to improve and develop the roles of GPNs and HCAs.

The review has also informed a number of other resources that have been put in place to support general practice make the most of its nursing workforce, including:

- ▶ a series of workshops to be held in September and October to support the development of the HCA role
- ▶ resources for general practice to enable HCAs to safely administer influenza and pneumococcal vaccines to adults
- ▶ a general practice nurse conference in October
- ▶ a WiPP guide for commissioners ■

Paul Vaughan is national project manager, HCA Initiative, WiPP

Anne Longbottom is project manager, Staffordshire University

Gianpiero Celino, Webstar Health

Sue Cross is national project manager, GPN Initiative, WiPP

- ▶ You can read the full review at www.wipp.nhs.uk and freely access the wide range of resources that informed the rapid review at www.wipp.nhs.uk/269.php

Reference

Royal College of Nursing (2005) *Employing Health Care Assistants in General Practice*. London, RCN.