

## Unit Two

# Employment of general practice nurses from an education provider's perspective

### Key messages

Once you have read this Unit, you should have an understanding of:

- *the areas where you can help employers improve their employment knowledge and skills*
- *the importance of induction programmes for general practice nurses (GPNs), and the role of local higher educational institutions (HEIs) in providing accreditation and equity of standards to these programmes.*

## Education for employers

Because GPs have such a broad medical knowledge, it is often assumed that they know about everything else as well. However, naturally this is not the case – for example, GPs may require education and information on issues such as employment law and protection of staff. Most GPs work with the practice manager to help fill this knowledge gap, although their level of knowledge may also vary – workshops or modules on employment law and practice may therefore be useful for local practice managers.

The following components should be included in an employment programme:

- *drawing up contracts of employment*
- *Agenda for Change*
- *equal opportunities and valuing diversity*
- *nursing qualifications and post-registration education*
- *delegation of medical tasks – indemnity and vicarious liability ([www.rcn.org.uk/pcph](http://www.rcn.org.uk/pcph))*
- *employment law – including sickness pay, maternity and paternity leave, time off for dependents and the \*Age Discrimination Act (takes effect from October 2006)*
- *health and safety at work*
- *interviewing skills*
- *creating induction programmes*
- *conducting appraisals*
- *dealing with poor performance*
- *workforce planning.*

## Education for GPNs

General practice nursing is becoming increasingly recognised as an attractive career option for nurses as it embraces so many of the varied aspects of patient care. Because of the nature of the role of the GPN, education and regular updates in a range of areas are required in order to ensure the continued safety of patients. However, GPNs frequently work in relative isolation and, therefore, do not have the level of interaction with other nurses that exists in the wider nursing community. As a consequence of this, GPNs are unlikely to learn about new skills and health care advances from their colleagues. It is, therefore, important that they seek other reputable sources of learning and development.

Local education providers may offer introductory programmes for GPNs, which should link in with the induction programmes organised by the practice or primary care trust (PCT). Since these programmes are likely to be task orientated, educators should complement them by adding theoretical concepts in order to develop a broader understanding of the GPN's role.

Induction programmes developed by practices and PCTs, although typically of a high standard, are unlikely to be accredited. However, linking induction programmes with introductory modules for GPNs in HEIs will provide both accreditation and associated quality assurance. This provides reassurance that individuals who have successfully completed the programme will be capable of delivering safe, effective patient care.

#### *Tool – Sample induction programme*

Standardisation in the approach to introductory programmes should be discussed with the individual responsible for commissioning education for GPNs from the local Workforce Development Directorate (or equivalent), for example:

- *academic component – provided by HEIs*
- *clinical component – proficiency taught and assessed in the practice setting using experienced GPNs as mentors.*

## Introductory programmes for GPNs

There are many prospective GPNs that may find it difficult to gain employment in this area because of their limited experience within general practice. Introductory GPN programmes will, therefore, be particularly attractive to these individuals.

An introductory programme for GPNs must have a clinical component that both teaches practical skills and provides evidence of a basic level of competence. Nurses who are not currently working in general practice will, therefore, need to gain a placement in this area, with an appropriate mentor. Having completed the introductory course, nurses could work as bank nurses to provide locum cover prior to gaining full employment with the practice. The PCT, Local Medical Committee or Deanery should be able to help facilitate this process.

## Marketing

Your current provision of courses likely to be accessed by GPNs should be reviewed and statistics analysed relating to uptake:

- *is course uptake increasing in line with the increase in GPN posts?*
- *do your courses provide the full range of topics required by GPNs?*

It may be useful to run a focus group comprising GPNs, GPs and GPN professional leads to explore local educational needs.

\*The Age discrimination Act 2006 is coming into force on the 1 October 2006. The regulations (which will not affect the age at which people can claim their state pension) will:

- ban age discrimination in terms of recruitment, promotion and training
- ban unjustified retirement ages of below 65
- remove the current age limit for unfair dismissal and redundancy rights.

They will also introduce:

- a right for employees to request working beyond retirement age and a duty on employers to consider that request
- a new requirement for employers to give at least six months notice to employees about their intended retirement date so that individuals can plan better for retirement, and be confident that "retirement" is not being used as cover for unfair dismissal.

For more information go to [www.eoc.org.uk](http://www.eoc.org.uk)