

Unit Five

Career development from a general practice employer's perspective

Key messages

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

- *career pathways available to general practice nurses (GPNs)*
- *benefits of encouraging career progression*
- *how to support career progression.*

Nursing in primary care has received national direction,^{1,2} and the 10 key roles for nurses in the *NHS Plan*³ has provided the encouragement required for these roles to be expanded. The plethora of job titles used, however, poses challenges to practices in terms of defining jobs and levels of practice. The terms 'advanced nurse practitioner'⁴ and 'specialist practitioner'⁵ have now been defined by the Nursing and Midwifery Council (NMC), with an accompanying outline for educational preparation.

Outlining roles on the basis of the activities that GPNs do, rather than relying on job titles to differentiate between roles, may help better define nursing posts and levels of practice. This is the principle underlying the *NHS Knowledge and Skills Framework*⁶ (*KSF*) which seeks to:

- *clarify the knowledge and skills needed in a post*
- *accurately apply knowledge and skills to job demands*
- *ensure access to appropriate learning and development*
- *identify the knowledge and skills needed for career progression*
- *link appropriate pay to appropriate use of knowledge and skills.*

The *KSF* will cover all GPNs working in general practice who are employed by primary care trust medical services, or the practice, where practice employers have adopted the *Agenda for Change*⁷ (*AfC*).

The type and extent of knowledge and skills that define specific roles in nursing are useful for:

- *developing general practice teams*
- *agreeing skill mix*
- *planning training to develop various competences.*

The *KSF* job profile will act as a prompt for action by GPNs at their annual appraisal to ensure that the knowledge and skills relating to their current role are up-to-date. **Unit: Competences of general practice nurses** includes competences for GPNs aligned to the *KSF*. As a practice employer you will be able to use the *KSF* profile to review opportunities for the GPN's personal and professional development.⁸ This should complement their current work or prepare them for another role to further progress their career and benefit the health service. Reviewing opportunities for development will help with succession planning by anticipating the knowledge and skills required for future roles that GPNs may be required or expected to undertake.

It may be useful to locally define what titles mean in terms of roles undertaken. See

Tool – Varying roles within general practice nursing for examples of typical GPN roles, and the qualifications required. (NB These provide a broad indication of the type of work that may be involved, but should not be taken as definitive roles or requirements).

See **Tool – Varying roles within general practice nursing** for examples of local definitions that have been devised to create a common understanding of roles within localities.

Advanced nurse practitioners

The term ‘advanced nurse practitioner’ will be formally recognised (from autumn 2006) by the NMC for nurses who have undertaken significant advanced level study, and are usually educated to a Master’s degree level. Often these nurses will also be able to prescribe. Nurses using this title will be trained to undertake physical examinations and manage many conditions autonomously. Many nurses in this role see patients requiring same-day appointments in place of the GP. The NMC plan to record this title as an additional component on the nurses’ register. Once this happens there will be a transition period of approximately 3 years; during this time, existing nurse practitioners can top up their skills to the requisite level, or register with the NMC as advanced nurse practitioners.

Nurse practitioners

Nurses who use the term ‘nurse practitioner’ (rather than ‘advanced nurse practitioner’) will be unable to do so after the transition period has ended. Current nurse practitioners will need to prove to their professional regulatory body that they have the requisite skills to be registered as advanced nurse practitioners, or undertake additional study to progress to this stage. See **Tool – Studies around effectiveness of nursing roles** for information on the evidence base for expanded GPN roles.

Often GPNs develop specialist expertise that really transforms the care for patients with a particular long-term condition. This should be welcomed and encouraged within the practice, with the aim of developing a team approach to patient care.

“ *Primary care trusts (PCTs) have recognised a need to improve services for patients with chronic respiratory disease. A joint service, involving GPNs, from primary and secondary care has reduced admissions and re-admissions in the Knowlsey PCT.*
For more information contact: Shauna.dixon@sthkhealth.nhs.uk. ”

How the general practice employer can help with career planning and development for GPNs

You will want to enable the GPNs you employ to progress in their careers. They will need all the support and encouragement you can give them if they are new to the role, or your practice, or lack confidence in their ability and potential. All GPNs will appreciate an environment and culture where career development is welcomed and enabled. If your GPNs are happy and fulfilled working in your practice, they will be likely to remain in your employment; or if they do move on, they will tell their friends and colleagues what a fantastic start your practice has given them. If GPNs take on courses such as specialist practitioner,⁵ advanced practice⁴ or prescribing qualifications⁹ (see **Unit: Education and professional development of general practice nurses**), make sure you support them.

Think about succession planning, so that you can minimise disruption if a key member of staff leaves the practice team. The effort you put into succession planning will help GPNs and other staff to progress, as they take on further roles and responsibilities along their career pathway. If people do leave your employment or move onto more senior positions within the practice, focus on staff at the more basic levels. Evaluate how you can support them in moving up to fill a more senior or experienced post. If you are in touch with your staff's career aspirations, then you can help them to progress, and in turn boost their job satisfaction and motivation.

Expanding roles for GPNs

Many different roles have evolved within general practice nursing, as the nursing profession has expanded its boundaries. There is considerable potential for GPNs to move upwards, with increasing levels of responsibility.

As an employer you should recognise individual's skills and encourage the development of these, for example:

- *plan all new roles in partnership with patients and front-line staff, evaluating the whole system and care pathway*
- *ensure that managers are in place to support and work creatively with staff in new roles. This managerial role will provide the infrastructure for the GPN role to develop, and may be taken on by a senior nurse or a GP with special responsibility and an interest in the development of GPNs*
- *understand the NMC Code of Professional Conduct¹⁰ and ensure that clear lines of accountability and professional advice are present*
- *recognise the skills and knowledge needed for the new role and devise a plan of how these skills can be gained*
- *support GPNs to implement the 10 key roles for nurses set out by the Chief Nursing Officer in line with The NHS Plan³*
- *use the opportunities provided by extra nursing responsibility to enhance the service provided by your surgery*
- *work with local higher education institutes and other education providers to provide appropriate training for your GPN to support the advancing role and continuing professional development*
- *provide adequate time for study and initiate formal arrangements for clinical supervision and mentorship*
- *ensure that all GPNs have annual individual appraisals and personal development pathways (PDPs), with a clear and agreed career structure for the development of their role.*

See **Tool – Policy on study leave** and **Tool – Creating a PDP** in **Unit: Education and professional development of general practice nurses**.

Effectiveness in advanced GPN roles

GPNs can become skilled in consultations for minor illnesses – seeing patients who want same-day appointments. Research studies¹¹ show that care given by appropriately trained nurses is clinically comparable to GP care. Other GPNs prefer to advance their skills relating to long-term conditions, and studies relating to nurse-led care for long-term conditions also shows that nurses have equal clinical competence to GPs, when they are adequately trained. **Tool – Varying roles within general practice nursing**

Many practices have supported their GPNs to become highly-skilled nurse practitioners who can take on significant work that has traditionally been undertaken by GPs. It is vital that any training or education for these advanced roles should be accompanied by an assessment of competence in practice (see **Unit: Education of professional development of general practice nurses**).

For a summary of selected research findings relating to the performance of GPNs in advanced roles, see

Tool – Studies around effectiveness of nursing roles

Support the learning needs of your GPNs as an integral part of their career progression

Help your GPNs to identify their learning needs (see *Unit: Education and professional development of general practice nurses*) and review how attractive your practice is to work in. Introduce the GPNs to the opportunities there are for them to progress, and develop their roles at team development away days, team information meetings, their annual appraisal or performance reviews. Use the team to develop protocols and guidelines that help deliver consistency of care. These will help move nurses into more demanding roles with confidence. **Tool – Using protocols, standards, policies and guidelines to enhance confidence and career development**

Share the practice plans with staff and ask for their feedback. Keep your GPNs and other staff well-informed about ideas for new skill-mix arrangements or revised clinical protocols that increase their responsibilities. The learning needs and career development of your staff can then be matched to your service and development needs and costs of linked training incorporated into your practice business plan.

Systems that underpin career progression for your staff and keep them motivated are:

- *personally tailored induction programmes with opportunities to find out how each of the other team members work and what their roles entail*
- *bespoke personal development programmes*
- *good team working*
- *regular appraisal and reflection on development*
- *support for clinical supervision*
- *facilitation of GPN peer-group meetings with GPNs/GPs from other practices, to discuss issues and share good practice*
- *updating of clinical and non-clinical knowledge and skills, so that the GPN is always moving forward in levels of competence and gaining transferable skills that will help their career progression*
- *mentors for GPNs and other staff – would the GPs and practice manager be prepared to act as mentors to the nursing staff? Would the local university or college nominate staff to act as mentors to your practice staff. This will help them to stay in touch with staff at the forefront of care*
- *shadowing opportunities, for example, allowing your GPN to spend a day with the district nurse, health visitor, community midwife, GP or podiatrist during their induction period or later on*
- *encouraging GPNs to take on an educational and supportive role for junior staff*
- *socialisation of the GPN into the general practice business and culture.*

Tool – Documentation for appraisals – using an action plan

Use the following link to find information on staff appraisals, staff appraisal invitations, a useful appraisal questionnaire for both appraiser and appraisee, and a staff handbook on conduct and disciplinary procedures, www.equip.ac.uk/practiceManagement/docs/protocols/index.htm.

Set out a study-leave policy for GPNs

Develop a policy for GPNs and other staff that covers study leave and costs, if you do not already have one.

A sliding scale for funding study leave could be developed:

- 100% practice reimbursement for all study leave and costs for courses that primarily benefit the practice
- 50–70% practice reimbursement to reflect the sharing of costs for courses that benefit both the practice and individual GPN, giving them transferable skills
- limited practice reimbursement for courses that do not benefit the practice or NHS.

Example: Encouraging GPNs to take study leave

Thistle Moor Medical Centre provides all staff with 5 days of study leave per year and encourages them to use it.

'Nurses have a study-leave entitlement of 5 days over and above their annual leave entitlement and are encouraged to use it. If extended study leave is required, the individual and the practice negotiate the additional time required.'

'Individual training/learning needs are identified at staff annual appraisals. Personal learning plans are then prepared with staff and the Human Resources team. Individual needs and the needs of the practice are identified and resources identified for the forthcoming year. All training is prepared in collaboration with the individual needs of staff and the practice business plan. Staff are given leave for mandatory training, for example, immunisation updates, over and above the study leave allocated.' For more information contact Nalini at: nalini.modha@gp-d81625.nhs.uk.

Tool – Policy on study leave

Individual performance reviews

For the majority of health care professionals, appraisals are undertaken by the individual's line manager. Effective appraisals require a defined set of skills,¹⁴ and listening is probably the most important of these. This means resisting any temptation to interrupt or dominate the conversation, and not going in with preconceived ideas and conclusions already made. The balance of talking in an appraisal should be roughly 80:20 between the GPN and the appraiser, respectively. The appraiser should give constructive feedback to encourage best performance. See *Tool – How to give constructive feedback: being an effective appraiser* and

Tool – Documentation for appraisals – using an action plan.

Use the following link to find information on appraisals for staff, staff appraisal invitations, a useful appraisal questionnaire for both appraiser and appraisee, and a staff handbook on conduct and disciplinary procedures, www.equip.ac.uk/practiceManagement/docs/protocols/index.htm.

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