

# Unit Two

## Employment from a general practice nurse's perspective

### Key messages

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

- *where to look for a job as a general practice nurse (GPN)*
- *how to apply for a GPN post*
- *how to complete an application form*
- *what to expect at an interview, and hints and tips on interview techniques*
- *induction to the GPN role*
- *clinical supervision*
- *trade union membership*
- *organisational information.*

This is an exciting time to be a GPN. *The NHS Plan*<sup>1</sup> emphasised the importance of primary care, which is usually the first place a patient contacts when feeling unwell, and how services will move from secondary to primary care.

A career as a GPN provides a rewarding opportunity for nurses to use a broad set of skills, rather than having to specialise in one particular area, like in a hospital setting. Working as a GPN will provide you with the following:

- *an opportunity to meet all kinds of people, from babies and young children to older people*
- *an involvement in health care provision that ranges from minor illnesses to serious, debilitating conditions*
- *an ideal setting to make full use of a nurse's skills through contact with the whole community*
- *a flexible and responsive working environment that promotes and encourages role development and autonomy.*

The current model of health care provision is unlikely to be sustainable,<sup>2</sup> and therefore increased emphasis is being placed on encouraging patients to take responsibility for their own health. The *Expert Patients Programme*,<sup>3</sup> which encourages patients with long-term conditions to manage their condition better, is driving this change in emphasis. With appropriate training and support, GPNs will have the knowledge and skills in patient education to help with this change in direction.

The Nursing and Midwifery Council (NMC) *Code of Professional Conduct*<sup>4</sup> stresses that nurses must:

- *be aware of their own levels of competence*
- *always work within their own competence levels, in order to maintain professional standing and ensure patient safety.*

This is a matter of high importance as the role of the GPN is expanding and moving across the traditional boundaries between nursing and medicine.

“ *I love my job as a GPN. Working in general practice means that you get to know patients really well because they come back to see you with different conditions from time to time. You also get to know the whole family as they're all registered with the practice and that really makes you feel as if you know them. It's very rewarding to help patients with long-term conditions manage their illness more effectively through patient education and monitoring.*

*Angela, GPN from Stoke-on-Trent*

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“ *Working as a GPN is really varied and interesting. You're always learning something new. It's rewarding because patients really appreciate what you do to help them, and it's never mundane or boring.*

*Susan, GPN from Durham*

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“ *A GPN role is very fulfilling, with a huge variety of problems that present. As a practice, we have a positive team spirit and work together. The patient contact goes back through generations of the same family, and you can see youngsters growing up and having their own families.*

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If you are already employed in general practice, you will be keen to know that all the policies and procedures that the practice has are up-to-date and in line with current employment law. If you are hoping to start a career as a GPN, you will want to know the best way of finding the right job for you.

## Person specification and job description

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Before advertising the GPN post, the practice will have profiled the needs of the patient population to enable this to be matched with nursing provision. A person specification will be produced, which will relay the kind of personal qualities that are needed for the job. See *Tool – Person specification for GPN role*. Looking at some real-life examples of person specifications linked with job descriptions will help you to decide if you are suited to the post. In addition, the practice should provide a job description.

*Tool – Job description examples for GPN roles*

The job description will clearly identify the type of role that you are expected to take on, although this may be reviewed each year at your annual appraisal. As there is so much variation in the role of a GPN, you will need to read the job description carefully to determine whether or not this is the right job for you. Some roles will focus mainly on long-term conditions – for example, managing clinics and monitoring patients. Others will have an emphasis on seeing patients who present with symptoms of minor illness and require same-day appointments for advice or treatment.

Consider whether the practice needs a GPN who is qualified as an independent/supplementary nurse prescriber. All nurses who are qualified to prescribe should also have associated skills in assessment and diagnosis. Nurse prescribers are able to prescribe any medicine within their scope of practice, with the exception of controlled drugs, which they are able to prescribe on a clinical management plan as a supplementary prescriber with agreement from the GP. Do not confuse the qualification of independent or supplementary prescriber with the community practitioner prescribing qualification (V100) held by nurses with a district-nursing or health-visiting background. This qualification will only entitle GPNs to prescribe from a very limited formulary (predominantly dressings).

As you and the practice develop, the GPN role may change according to the needs of the practice. This, however, cannot be done without negotiation or agreement from you.

## Terms and conditions

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In addition to your job description and job offer, you will be given the terms and conditions of employment. Although you might be able to negotiate some changes before you sign the contract of employment, these terms and conditions, for example hours of work, pay and holiday entitlement, will become legally binding once both parties have signed the document. For an example of what to expect, see [Tool – Terms and conditions of employment: what should GPNs look for?](#) and

[Tool – Example of a contract of employment for GPNs](#).

Your contract should be given to you within 2 months of you starting work for the practice. Keep it in a safe place. This could be kept in your personal development review folder, as it is sometimes useful to refer to the job description when considering your performance over the past year at a review.

## Levels of pay

Some GPNs may be employed by primary care trusts (PCTs), but more and more GPNs are now employed directly by the GP practice. As an employer, the practice can therefore determine the levels of pay.

The Royal College of Nursing (RCN) strongly believes that nurses and health care assistants (HCAs) employed in general practice should be employed on *Agenda for Change (AfC)*<sup>2-4</sup> terms and conditions. The *new General Medical Services (nGMS) contract* also encourages this practice.<sup>5</sup> *AfC* provides a uniform package of terms and conditions, and should form a stronger link between the rewards and the demands of any given job. It is intended to replace clinical grading for nurses, and the terms and conditions as set out by the Whitley Council. It is a modern pay-and-conditions framework based on the principle of equal pay for work of equal value. *AfC* links with the *NHS Knowledge and Skills Framework*, which outlines the competences required for various roles. See [Unit: Competences of general practice nurses](#) for more information on adopting *AfC*.

The practice may not have implemented *AfC* in its entirety, but adopted some of its principles, such as similar pay scales and holiday benefits. See [Tool – Job descriptions for GPN roles](#) to compare your own post with others that have been banded according to *AfC* – this will help you gauge how the practice views the post. Practices may wish to work together across localities to agree the implementation of *AfC* as this could reduce the risk of nurses moving between practices.

## Pay reviews

The following questions should be asked regarding pay reviews:

- *when do they happen?*
- *how often?*
- *what are they based on – competences, changes in role or just a blanket percentage increase across the practice?*

Having satisfied yourself that you really want to work as a GPN, it is a good idea to find out who the nurse lead is within your local PCT. They are likely to know of any vacancies that are currently available or likely to come up in the near future. In addition, suitable job vacancies may be advertised in the local paper.

## Applying for a GPN post

Having found a post you are interested in, it is a good idea to make an appointment with the practice manager to undertake an informal visit and see whether the atmosphere and facilities of the practice suit you. Find out whether the employment is via the PCT or directly with the practice. General practices vary tremendously from large partnerships in medical centres with 10–12 GPs, who may have a team of GPNs and HCAs, to single-handed practices where you are likely to be the only GPN.

Different working environments will suit different people and personalities. Some GPNs thrive on working as part of a large practice team, interacting with their colleagues as a constant source of support and advice. However, others enjoy working in relative isolation so that they can work as they wish to with limited interaction. Ask for an informal visit to get a feel of the ambience of the practice and spend time talking with the reception staff, nursing team and GPs. General practice teams vary enormously and taking the time to find out what's right for you will pay dividends.

Your application may involve sending a copy of your curriculum vitae (CV), which should clearly demonstrate the skills that you can bring to this post. See [Tool – Example of a general practice nurse curriculum vitae](#) for an example of a CV that provides evidence of suitability for a GPN role and [Tool – Hints and tips on compiling your CV](#) for advice on how to write a CV.

## Interview

Remember that interviews are a two-way process. It is not only an opportunity for the practice to assess what you can bring to the job, but an opportunity for you to see if you would like to take the job if it is offered.

If selected for interview, make sure that you have a list of questions for the practice to answer, including the following:

- *will there be a formal induction programme?*
- *what opportunities are there to undertake training and development (not only initially, but as part of your longer-term development)?*
- *will you be assigned a mentor – who is this likely to be and will you have access to clinical supervision?*

# Induction

As part of the induction programme, you need to agree your training priorities and an action plan for your professional development. Everyone has a different experience of induction when joining a new employer. Induction is your introduction to the practice, and hopefully will be more than just a warm welcome and where to put your coat, although these things are important.

There are three key areas that you should look for, which are detailed below.

## 1. Role information

This will help you to get to know all about your new role and the responsibilities you will have, including health and safety, and what will be expected from you on a day-to-day basis. Is there an induction booklet with a plan for your first month? Has any training and development been organised for you? Although the practice will have checked that you have current registration with the NMC, they may wish to satisfy themselves of your clinical competence. You may be observed by a senior GPN or GP, who will check your training qualifications and skills, in order to ensure that the best service is delivered to patients. See [Tool – Sample induction programme](#) for more details.

No-one will expect you to know everything when you start. However, they will expect you to be honest about your current capabilities (in adherence with the NMC *Code of Professional Conduct*<sup>6</sup>) and you should be willing to learn new skills. If you have never worked as a GPN before, you should contact the PCT to find out what introductory courses are available. If there is limited information available, you could contact the nursing department of your local university to find out whether or not they run any useful courses that you could access.

You may need to ask the professional lead for GPNs within the PCT to help you find a mentor, if this hasn't already been done. Using a mentor outside the practice can be useful as they often bring in new ideas. The PCT professional lead for GPNs will also know whether or not there is a local network of GPNs who meet up to discuss their roles and access training, and to share ideas with other practices.

## 2. Support information

Mentorship is a key component in supporting new staff and access to one should be agreed at your interview. Having a mentor who is designated to provide support and advice will help you to feel more secure. Ideally, this should be another GPN. However, if you are the only GPN in the practice, you will have to ask for a mentor from outside the practice. You should not be content to use the GP as a 'buddy' – you need to have support from a fellow GPN who understands the nursing ethos and the NMC *Code of Professional Conduct*.<sup>6</sup> See [Tool – Mentorship and buddying scheme](#) for more details.

## 3. Organisational information

Getting to know the culture and the key goals of the practice will help you to understand why things are done the way they are. You should arrange to spend some time with the practice manager to understand systems of payment, working practices and targets that need to be met. Understanding the *nGMS contract*<sup>5</sup> will help you to appreciate why the practice may be so keen to reach some of the targets in the *Quality and Outcomes Framework*.<sup>7</sup> Remember that GPs are independent contractors and this makes a big difference to the set-up of a practice, compared with the organisation of a hospital.

Take time to read some of the GP newspapers to get a flavour of how general practice functions. There is a lot of information available on the *nGMS contract* and a basic understanding of how the practice is financed will help you to see why patient services are organised in a certain way.

## Employer's liability:

### Vicarious liability and the responsibilities of the practice/employer

Employers have vicarious liability for the action of their employees as long as:

- *the employee was acting in the course of their employment (time, place etc)*
- *the employee was doing a job which they are employed to do*
- *the employee works within the employer's policies.*

### Employee's indemnity cover

Employees may have their indemnity cover provided by their employer, but when nurses are self employed, advice should be obtained from the Royal College of Nursing ([www.rcn.org.uk](http://www.rcn.org.uk)) and the Medical Defence Union ([www.the-mdu.com](http://www.the-mdu.com)).

“ Although I haven't really used my membership much, I find it essential as a reassurance that IF anything were to cause a problem at work then I know I could get instant legal advice from my professional organisation. I have used their 24-hour advice line once – I was worried about something that had happened at work and, instead of letting it build up into a huge question, I phoned the advice line that evening at home. It was really good to be able to talk through the incident and get some objective advice about what I should do. I found that incredibly helpful. ”

“ I use the RCN as a resource for information and education. They send invitations to conferences and keep you up-to-date with what is going on. You know they are always there if you need them and that's reassuring. ”

“ Being part of a union gives GPNs a stronger voice at government level. ”

### References

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