

Unit Five

Career development from a strategic perspective

Key messages

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

- *the career structure within general practice nursing*
- *how the general practice nurse (GPN) role can be supported and developed*
- *annual appraisals for GPNs.*

Career development from a strategic perspective

In comparison to other branches of community nursing, general practice nursing is still in its infancy. This means that there tends to be a lack of established career structure. Many GPNs progress within their speciality because of individual interest or good fortune, rather than a structured approach to career planning. The scope of general practice nursing has increased dramatically since the introduction of the first *General Medical Services (GMS) contract* in 1990, and has further expanded since the revised 2004 contract. The contractual emphasis on improving quality in the management of long-term conditions means that GPNs have a significant part to play in helping practices to gain points within the *Quality and Outcomes Framework*¹ (www.nhsemployers.org/primary/primary-890.cfm). The value of GPNs to practices is thus becoming increasingly important. Primary care trusts (PCTs) have a role to play in helping to regulate the variety of roles within general practice nursing (see *Unit: Introduction*) and an obligation to provide advice on progressing from one level to another.

Any progression within general practice nursing should be accompanied by an appropriate level of education and skills (see *Unit: Education and professional development of general practice nurses*).

Example: Facilitating career progression

'Liverpool city PCTs have introduced an "associate nurse" development programme, which has significantly increased the number of nurses working with general practices. This 12-month development programme supports nurses from secondary care move into new roles working in the community and general practice nursing. The programme has enabled nurses to develop the requisite skills for working in general practice, and has therefore enabled the development of skill-mix within practices. Experienced GPNs welcomed the opportunity for the nursing support that has enabled them to develop the knowledge, skills and capacity required to undertake minor-illness management and increased management of long-term conditions. Following the development programme, these nurses have moved into a number of new roles, including generic roles that continue to support the practice nurse.'

In order to evaluate the various roles needed within general practice it is essential to clearly outline the types of career opportunities available. The Nursing and Midwifery Council (NMC) have identified requirements for 'specialist practitioner'² and 'advanced nurse practitioner' status.³ However, there is no national consensus about the qualifications required for other common titles in general practice nursing (eg 'senior nurse' and 'nurse practitioner'). Adopting a standardised meaning for these titles across the PCT or Strategic Health Authority will help to ensure clarity and consistency. It may also enhance patient safety measures conducted by employers and GPNs, with clear guidance about the activities that may be taken on by individuals. **Unit: Competences of general practice nurses** provides information on how to link roles with competences (using the *NHS Knowledge and Skills Framework*⁶) within general practice.

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

For examples of local definitions that have been devised to create a common understanding of roles within localities see *Tool – Varying roles within general practice nursing*. For information on the evidence base for expanded GPN roles see *Tool – Studies around effectiveness of nursing roles*.

Using protocols and guidelines within general practice nursing often facilitates role expansion. Having a ready-made source of these may be of great value to practices and, if adopted, will ensure consistency of care and enhance clinical governance. *Tool – Using protocols, standards, policies and guidelines to enhance confidence and career development*

Linking career planning and education for GPNs

It is essential to recognise that if attention is paid to GPN career progression, there must be equal attention paid to commissioning appropriate local education. Higher education institutes (HEIs) and other education providers should be aware of the growth in the number of GPNs and will hopefully wish to respond with the provision of education packages that suit their needs. The provision of a basic introductory programme is an excellent starting point to lead to more-advanced education. Local HEIs should be involved in discussions relating to roles and titles within general practice nursing, so that they fully understand the requirements in practice. This will help them to ensure that the courses they provide equip GPNs to be fit for purpose. The PCT can keep a check on the quality and relevance of local courses for all nurses working in primary care. To ensure courses are delivering what is needed for GPNs see *Tool – Questions to ask about courses*.

If you have conducted a profile of GPNs within the PCT you will be aware of any educational deficits within the workforce. Do not assume that GPNs are not well educated if they have not undertaken university accredited courses.⁴ Many GPNs attend study days alongside their GP colleagues that may be provided by pharmaceutical companies or deaneries, or they may learn through in-house seminars and tutorials. However, unless their learning is formally assessed and accredited, there can be no assurance of quality, level or competence.

See the Skills for Health website (www.skillsforhealth.org.uk/careerframework/tools.php) for the career pathways that are available to staff. You could use this career tool to help practices with succession planning or to check the staffing profile across the PCT.

When considering career options, a GPN will benefit from impartial advice. However, this is unlikely to be provided by their employer, since they may want to retain the GPN within the practice. Furthermore, it may suit the employer to keep the GPN in their current post, on the same pay level. There is therefore an opportunity for a forward-thinking PCT to offer impartial local career advice, for example, by providing information on advertised posts or posts they know will be vacant shortly, of interest to GPNs. This may help retain good staff in the local area, and could be a topic for the local GPN forum.

The Career Framework for Health

The *Career Framework for Health* has been developed by Skills for Health,⁵ and provides guidance on a flexible skills-escalation approach for health care workers. This framework allows for the transfer of competence-based skills in a direction to meet workforce, service and individual needs. It provides overarching elements for national consistency, while allowing maximum flexibility for local health organisations. The career framework has nine levels, based largely on levels of responsibility. As well as progressing through the levels, there is the opportunity for career movement within each level of the framework to support motivation and retention. The framework benefits organisations through support for service improvement by maximising staff skills.

The *Career Framework for Health* has been developed after 30,000 copies of a discussion document were distributed to over 500 health care organisations. Feedback from these organisations has helped to inform the priorities of the *Career Framework* project. A range of complementary tools and resources is under development for individuals, teams and organisations.

The *Career Framework for Health*⁵ tools and resources will be launched on the Skills for Health website, including:

- a workforce profile tool
- a career options tool
- a database of roles.

Visit the new *Career Framework* website at: www.skillsforhealth.org.uk/careerframework or e-mail the *Career Framework* team at: careerframework@skillsforhealth.org.uk.

The practice or PCT employing GPNs may support individuals to extend their skills at their current level of responsibility or develop the knowledge and skills necessary for the next level of responsibility or skill set. There is no guarantee of promotion or advancement from their current post, even when they have gained the requisite knowledge and skills. However, they will gain in job satisfaction and be able to take advantage of openings as they appear elsewhere if they want to progress further.

Although there are traditional career entry points for registered health professionals, these are complemented by other entry routes at lower levels, such as cadet schemes and role conversion. These routes attract people into the NHS from non-health careers who are seeking new challenges, and drawing qualified and experienced people back into the NHS workforce. The skills-escalator concept means that individuals have the opportunity to progress through learning and development at a pace that fits their needs and ability.

A PCT will need to invest in a cross-organisational way to implement the careers framework strategy. If staff such as GPNs are to progress within the career framework, consideration must be given to opening opportunities to health care assistants (HCAs) who can take on those tasks that require less skill and training. The WiPP toolkit for HCAs (www.wipp.nhs.uk/44.php) explores opportunities to increase the use of HCAs in general practice settings.

If PCTs do not consider working with education and careers advice providers, such as local colleges and connexions training, then workforce expansion and recruitment will be limited and piecemeal. The PCT's learning and development strategy should be relevant for all levels of clinical staff and should include requirements for best practice in appraisal and personal development planning. Access to learning and development activities and careers support resources should also be provided. To ensure maximum flexibility in the use of skills, see [Tool – Making the skills-escalator concept work](#).

Supporting and developing general practice nursing

PCTs have a lead role to play in the support and development of GPNs. The funding stream for this could use the local enhanced services budget under the *new General Medical Services (nGMS) contract*. Establishing a professional lead for GPNs or a specific post to support GPN development should be considered essential to facilitate progression for GPNs. The remit of these posts has great variation across England and the following examples illustrate how these roles can be used to good effect.

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When I first started work as a GPN I had regular visits from the PCT GPN development lead. She was really good about talking me through anything I was unsure about, and she found me a mentor to contact once a week.
Allison, GPN from Stoke-on-Trent

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The PCT lead GPN has been great about organising continuing professional development activities for all the GPNs. She regularly asks for topics that we want more information on and then attempts to set up education sessions around this. It feels like she's the voice for GPNs within the PCT. If she wasn't there I think they'd just forget about us!
Barbara, GPN from Hereford

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I only did my degree because of the GPN facilitator. She told me how to go about getting funding, and she was so enthusiastic about all the things I'd learn, and how I'd never look back and would move up the career ladder. I've got her to thank – she was the one who spurred me on; and she was really good about asking me how it was going whenever we met up at a training event or anything. I always felt like I could call on her if I needed advice or anything. That's the kind of thing you need in practice nursing, because sometimes you do feel like you're on your own!
Sharon, GPN from Sutton

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Tool – Job description for GPN lead posts in PCTs

The NHS Knowledge and Skills Framework

The NHS *Knowledge and Skills Framework (KSF)*⁶ will only be applicable to those GPNs who are employed by PCTs, or those working in general practice, where practice employers take up the option under *Agenda for Change (AfC)*.⁷ The PCT should encourage practices to adopt this in order to avoid discrimination in comparison with other community nurses.^{8,9} **Unit: Competences of general practice nurses** provides information relating to GPN competences and the *KSF* (www.dh.gov.uk). All general practices are required to adopt fair employment practices to ensure fair pay and terms, which satisfy equal pay legislation. There are helpful publications that answer frequently asked questions to explain how *AfC* affects independent general practice employers.^{8,9} The type and extent of knowledge and skills that define specific roles within general practice nursing are essential in developing general practice teams with the appropriate skill mix, and planning training to evolve different competences. The *KSF* profile of a job will act as a prompt for action by GPNs and their managers at the annual appraisal to ensure that their knowledge and skills about their current jobs are up-to-date.

Annual appraisals for GPNs

QOF Education 4
3 points

Annual individual appraisals (or performance reviews) provide a chance to review career progression and identify individual development needs. If the PCT is the employer of a GPN, the task of annual appraisal will almost certainly fall within the PCT remit so that the KSF profile can be used to review opportunities for personal and professional development for individual GPNs. However, even if GPNs are employed by practices it may be appropriate for the PCT to conduct the annual appraisal for individual GPNs. This will not only provide the PCT with an opportunity to give professional guidance and careers advice, but will also assist in the profiling of the skills of the GPN workforce. This in turn will help to identify the needs for local GPN education, which will also help with succession planning for practices and anticipate the knowledge and skills required for future roles. Explaining the potential advantages to GPs of using a few select professionals from PCTs to conduct the GPN appraisals may convince them that this is a favourable option. Some practices may wish to conduct joint appraisals. Although nursing managers within PCTs will be familiar with conducting appraisals for nursing staff, the following tools may be useful in recapping the skills required for effective appraisal.

Tool – How to give constructive feedback: being an effective appraiser

Tool – Documentation for appraisals – using an action plan

Future roles for GPNs

- Although role development can be seen in terms of advancing to a nurse practitioner or advanced nurse practitioner, further options of nurse partners, nurse-led personal medical services and practiced-based commissioning are also available to GPNs
- New initiatives^{10,11} point to nurses becoming partners in a practice and providing additional services such as out-of-hours care

More information on becoming a nurse partner can be found at: www.qni.org.uk/nursepartners.htm and www.rcn.org.uk/pcph.

Another area of development is the advent of the practitioner with a special interest (PwSI).¹² This role supplements a generalist role by delivering a high quality, improved access service to meet the needs of a PCT or group of PCTs. PwSIs may deliver a clinical service beyond the normal scope of general practice, undertake advanced procedures or develop services. There are numerous PwSIs employed by PCTs in different areas of clinical care. More information can be found at: www.dh.gov.uk/PolicyAndGuidance/OrganisationPolicy/PrimaryCare/GPsWithSpecialInterests/GPsWithSpecialInterestsArticle/fs/en?CONTENT_id=4066009&chkAryk9g.

“ The services we offer are very patient centred. Our clinics are local, easy to access and give patients the confidence of knowing they can see someone they know who has the time to spend with them. We don't diagnose. Our role is to troubleshoot, advise, support and educate.
Nurse with a special interest in diabetes ”

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