

Nurses in General Practice: Adding Value Across the NHS in England

Leading the Way Phase 3, July 2024. Sonnet Advisory & Impact CIC

GPNs are the backbone of primary care. GPNs serve not only as caregivers but also as leaders, innovators, and advocates for community health.

General Practice Nurses (GPNs) are Registered Nurses regulated by the Nursing and Midwifery Council. They work across a range of roles, offering a breadth and depth of expertise and skills in partnership with patients and families across the life course.

General practice nursing teams can lead programmes of care in areas that include, childhood immunisations, complex long-term conditions, cervical screening, and women’s health initiatives. In addition, as the workforce closest to their communities, they can play a key role in the delivery, organisation, and co-ordination of primary care. GPNs provide care across every village, town, and city in England and often fulfil key non-clinical roles in their practice. In a country with an ageing population and an increasing burden from major illness, nurse-led care for patients with a number of long-term complex conditions is a key way that the NHS can rise to meet these challenges.¹

General practice nursing has evolved over the last few decades

Our *Leading the Way* research was the first to fully articulate GPNs’ unique role and value. It found that GPNs are expert health care professionals who often lead the delivery of clinical areas and non-clinical activities, deploying their expert skills and expertise to meet their communities’ health needs. This is a far cry from the Traditional State in Figure 1, in which GPNs are seen as simply being there to support GPs in the delivery of care.

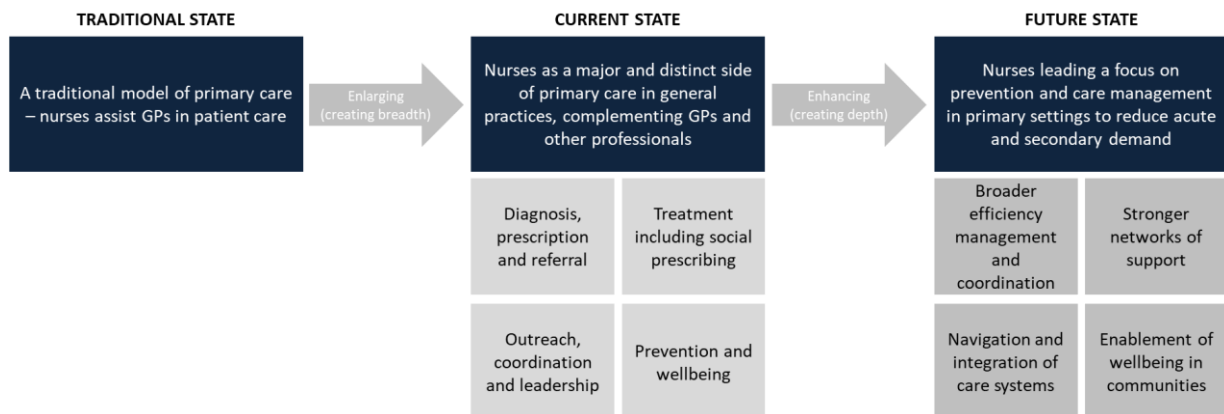


Figure 1: Traditional and future states of general practice nursing

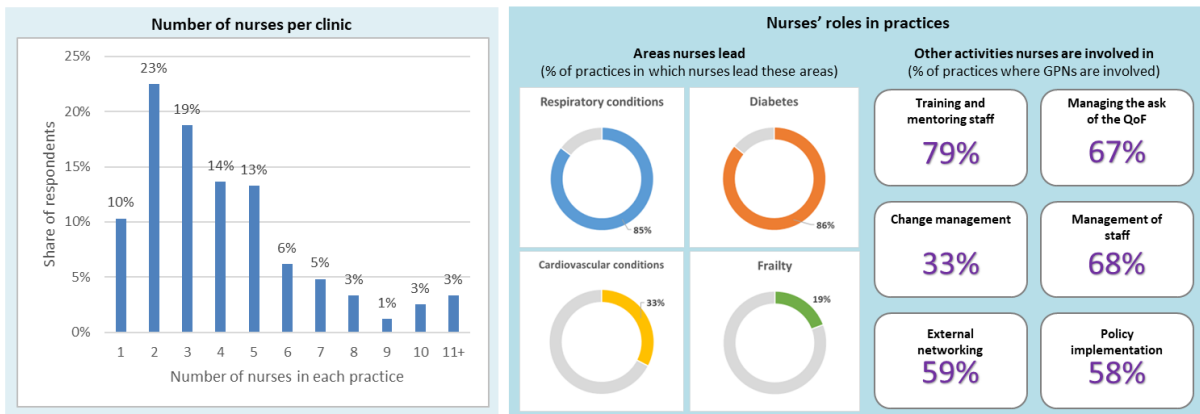
¹ NHS England (2022), [Primary Care and Community Nursing: A national update - Case Study 1: Saving GP time and increasing uptake through personalised, multimorbid chronic disease reviews.](#)

Most nurses operate in the 'Current State' shown in Figure 1. However, during our research we saw many examples of GPNs reaching their full potential and operating in the 'Future State.' Enabling all GPNs to operate in either the Current or Future States would generate significant value to patients, practices, communities, and the NHS through more efficient and effective delivery, reaching more patients and developing that key element: that communities are able to self-care.

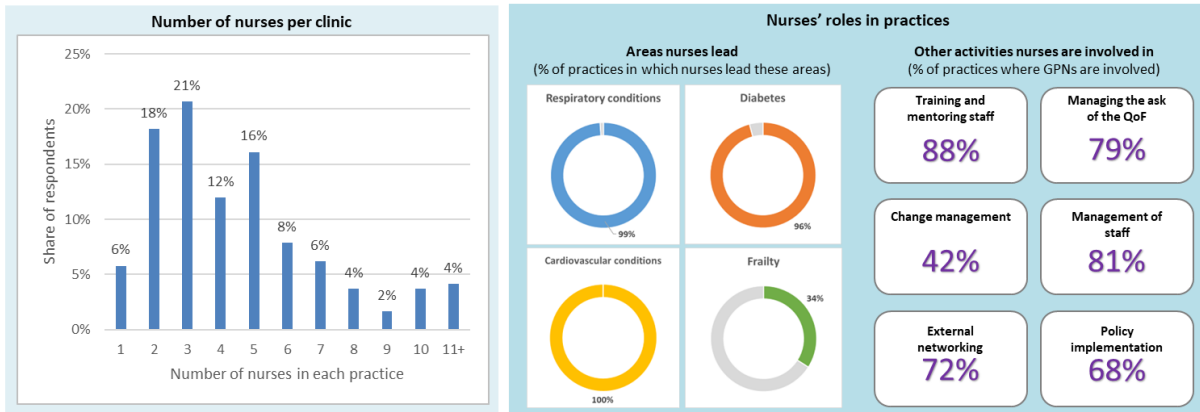
GPNs' potential needs to be recognised and realised in all areas of England

The role of nurses varies significantly across practices in England (see Figure 2):

Practices that employ nurses (897 practices)



Practices in which nurses lead services for cardiovascular conditions (291 practices)



Practices in which nurses lead no clinical services (63 practices)

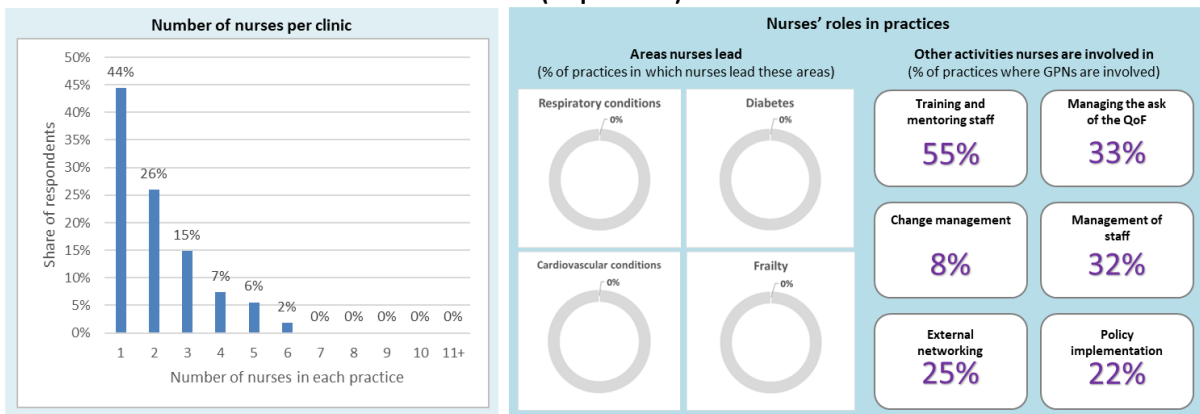


Figure 2: Select Leading the way survey results

From our survey data we have learned that:

- Within their practices, nurses seem to be leading the way in respiratory and diabetes services. They are also significantly involved in training, mentoring and managing staff, and managing the ask of the Quality and Outcomes Framework (QOF).
- Where nurses lead cardiovascular services in their practice (in 291 practices, a proxy for practices following best practice), the instances of nurses leading and being involved in clinical and non-clinical areas is higher. It may be the case that, where practices understand the value of nurses (and there is a bigger nursing workforce), they are entrusted to do more.
- In the 63 practices where nurses lead no clinical areas, only a small share of practices involve GPNs in non-clinical activities. It is likely that the relatively small nursing teams within these practices create capacity constraints and that the practices perhaps lack an understanding of nurses' full potential.

Across all practices there is a significant loss of opportunity here. In the 2022 publication of *Leading the Way*, we saw the huge financial and operational value in involving nurses and their unique skills in some clinical and non-clinical areas. For GPNs to fulfil their potential, there needs to be a greater recognition and an improved deployment of the role, as well as the skills and abilities of nurses. Key conclusions from our three phases of research are outlined in Figure 3.

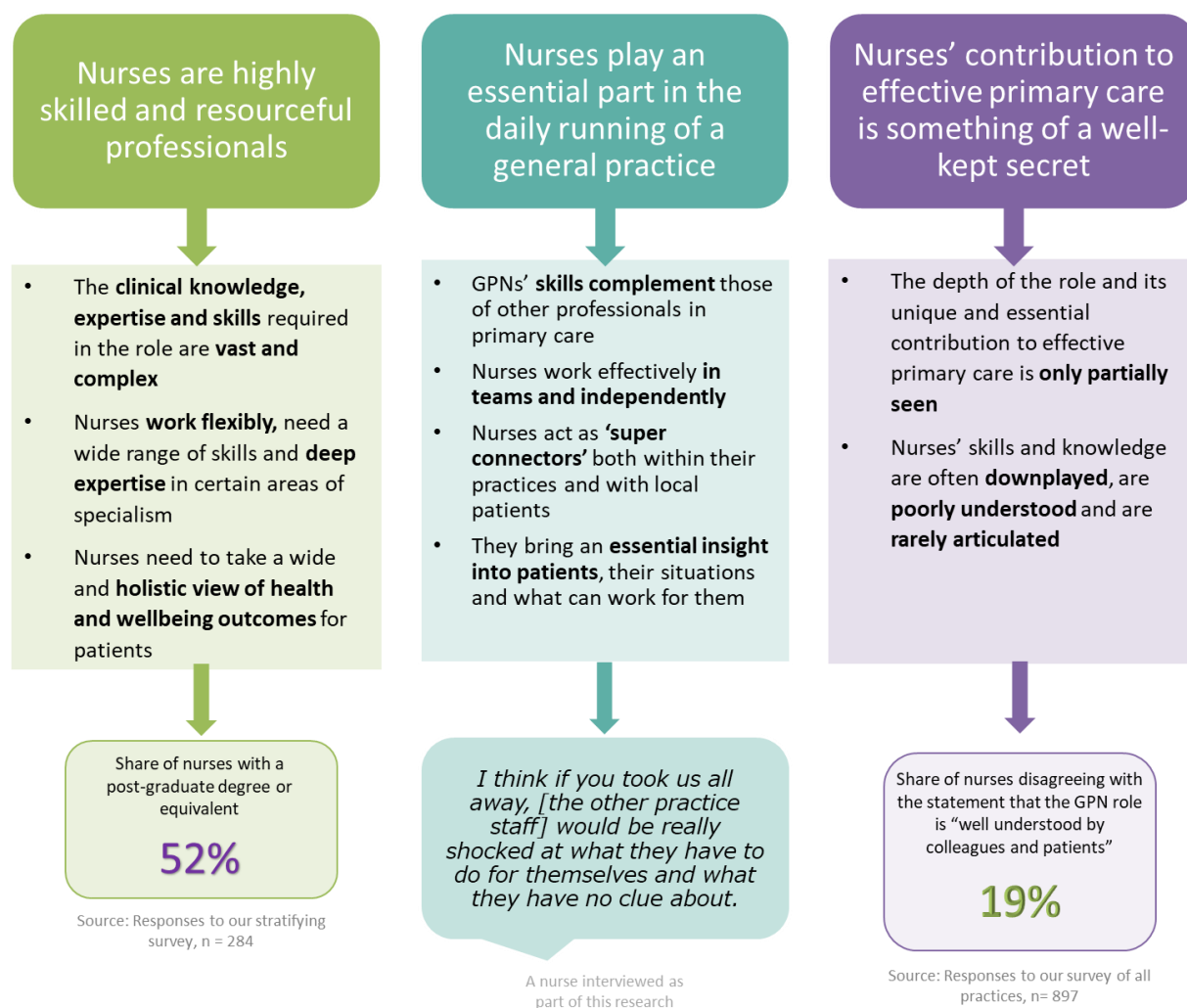


Figure 3: Findings from three phases of Leading the Way

There are barriers to nurses reaching their true potential

We have seen some truly outstanding practice by nurses. However, our survey findings show that, in many practices, there is greater scope for nurses to take on more responsibilities. The three most obvious opportunities are in:

- Opportunity 1** Leading cardiovascular, frailty, and mental health services – these are areas in which nurses’ skills and insights are well suited.
- Opportunity 2** Leading staff training, mentoring, and management – these are key to developing a sustainable succession of nursing skills within each practice and more widely across primary care, as well as building wider skills amongst other professionals.
- Opportunity 3** Managing the ask of QOF, external networking, and partnering with external agencies. Nurses are well equipped and skilled to perform these roles, to the advantage of both patients and practices.

Regional operation and governance may help

We found that practices in the South West are more likely to adhere to our GPN model of best practice. It is possible that regional governance – coordinating and working collectively – has made a difference to the experience of GPNs in the South West. This regional governance encompasses:

- A Nursing lead at regional level
- A link to the Primary Care Workforce Steering Committee
- Links to higher education and specialist training
- A centrally funded scheme that has proved nurses with no experience in general practice can thrive in their roles
- Activities to promote the CARE Programme
- Awards to celebrate GP Nursing

Recommendations

The full value that a highly skilled and effective general practice nurse workforce can bring to its practice, patients, community, and the NHS is significant. If we want to ensure that this value is realised and that nurses are able to reach their full potential, we need to make a range of changes to support them. In this context, we recommend that we should address the following:

1. *Improve the offer to general practice nurses*

- a. Socialise the implementation of Primary Care & General Practice Nursing Career & Core Capabilities Framework.
- b. Introduce remuneration for general practice nurses that aligns with the scope of practice and career progression for nurses.
- c. Ensure remuneration for general practice nurses is consistent across primary care and general practice.

- d. The terms and conditions² of general practice nurses need to be reviewed to be made consistent and comparable with those of other nurses working across the NHS.
- e. Ensure the sustainability of education and training budgets so that recruitment and retention of general practice nurses are supported and sustained. Here are some evidence-based and recommended examples of best practice:
 - i. Legacy Mentorship
 - ii. Nurses on Tour
- f. Seek commitment from employers to release nursing staff from delivery so they can undertake mandatory and discretionary training.
- g. Make student nursing placements in general practice easily obtainable and give practices the resources they need to manage these placements at Place level.

2. *Nurses should be represented and empowered at every leadership level in the NHS*

- a. Nurses should have a key influencing and decision-making role in policy, practice, and education at every leadership and managerial level. They therefore need to be part of decision-making forums:
 - i. At practice level
 - ii. At primary care network (PCN) and integrated care board (ICB) level
 - iii. In national forums

3. *Improve awareness and understanding of the GPN role*

- a. Campaigns to raise awareness and understanding of general practice nurses should be targeted at:
 - i. The general public
 - ii. National policy makers
 - iii. Whole primary care and community teams
 - iv. Wider NHS staff
 - v. Potential nursing recruits

4. *Address nurses' unsustainable workloads*

- a. Create more capacity for nurses to:
 - i. Offer supervision to staff working in primary care and in general practice
 - ii. Utilise and embed the professional nurse advocate role
- b. General practice and primary care nursing teams need to be integral to the Long-Term Workforce Plan.
- c. Nurses need to ensure that they are using the breadth and depth of their expertise to work with local communities to create health, wellbeing, and social value for and with populations.
- d. Health systems need to encourage innovative ways of working in primary and community care to improve population health outcomes and support the workforce, e.g. utilising group clinics.

² We note that key stakeholders are working together on T&Cs now, which is promising.

- e. Health systems should explore collaborative ways of working across primary and secondary care, drawing on the expertise of nurses in identifying innovation in services and harnessing their skills and expertise to deliver these new ways of working.

5. *Continue research into practice nursing*

- a. There should be ongoing empirical research into the general practice nursing role and, given new ways of working across health systems, this research also needs to explore the role of community nursing colleagues.
- b. The NHS should develop research capabilities among general practice nurses and support the development of clinical academic career roles across primary and community care.
- c. NHSE and ICSs should support the application and conclusions from research studies into the general practice nursing profession.

The research shows that there are easily attainable opportunities for practices to bring value to their operations whilst, at the same time, enhancing patient wellbeing. This conclusion was supported by the valued case study examples in [Leading the Way 2022](#), whilst the survey and its analysis in this latest research endorses it. We therefore need more nurses in the front line of general practice, in roles where they have real authority and autonomy.