

General Practice Nursing in the 21st Century: *Report for LONDON*

Contents

Workforce profile	3
Workload pressures	4
Salary	4
Multiple jobs	5
Working hours	5
Annual leave	6
Indemnity cover	6
Job title	6
Line management	6
Annual appraisals	7
NMC revalidation	7
Qualifications	7
Professional development	8
General Practice Nursing as a career	9
Home visiting	9
Multi-disciplinary working	9
Referral to specialist services	10
Participation in strategic development	10
Measurement of work	10
Conclusion	10
Required actions	11
References	11

Edited by Chloe McCallum Copyright: The Queen's Nursing Institute 2016

Introduction: GPN Report for London

In January 2016 the Queen's Nursing Institute published a major study on the General Practice Nursing workforce in the United Kingdom. The report was based on a major online survey of working nurses carried out in 2015. To read the full report, go to www.qni.org.uk/campaigns/general_practice_nurse_survey. This summary report extracts the data specifically for the London region.

Figures for London have been compared to the figures presented in the original report for the whole of the UK (QNI, 2016). A total of 382 General Practice Nurses (GPNs) who responded to the survey said they worked in London. This number is from an overall total of 3405 respondents, so London GPNs represented 11.2% of all respondents.

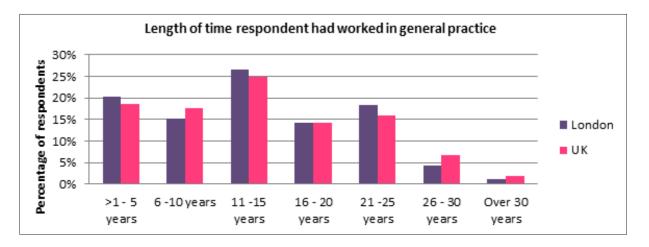
Workforce Profile

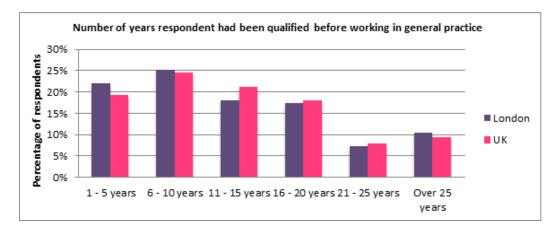
The workforce profile of respondents in London closely mirrors the average for the UK in terms of the proportions of men and women and the branch of the NMC register that the respondent is on.

	London	UK
Female	98.1%	97.9%
Male	1.9%	2.1%

Field of NMC register	London	UK
Adult Nursing	98.4%	98.5%
Children's Nursing	0.8%	1.0%
Learning Disability Nursing	0.5%	0.2%
Mental Health Nursing	0.3%	0.3%

The length of time that respondents had worked in general practice and the number of years they had been qualified before entering general practice were broadly similar between the workforce in London and across the UK.





The planned retirement dates of respondents in London and the UK as a whole followed a similar distribution. 31.2% of respondents in London plan to retire within the next 5 years, compared to 33.4% of respondents across the UK.

Planned retirement date	London	UK
Within the next year	6.0%	4.5%
Within the next 2 years	5.2%	5.5%
Within the next 3 years	5.8%	5.8%
Within the next 4 years	2.6%	3.6%
Within the next 5 years	11.5%	13.9%
Within the next 10 years	25.4%	27.3%
More than 10 years	41.9%	38.2%
Skipped question	1.6%	1.2%
Total within 5 years	31.2%	33.4%

Workload pressures

A higher proportion of respondents in London, 64%, felt that their nursing team did not have the right number of appropriately qualified and trained staff to meet the growing needs of patients, compared to 55% of respondents across the UK.

Salary

A greater proportion of respondents working in London are paid at the equivalent of Band 7 than in the UK as a whole. As described for respondents across the UK, some were unsure about which band reflected their salary, or said that bands were not used explicitly in their practice.

Pay band	London	UK
4	0.3%	0.7%
5	7.6%	13.3%
6	30.9%	38.1%
7	29.1%	23.5%
8	11.5%	10.6%
Nurse Partner	1.8%	1.6%
Prefer not to say/skipped question	18.8%	12.2%

'59% of London respondents thought their salary did not reflect their role.'

A smaller proportion of respondents in London said that they had increments applied to their salary based on performance: 7.9% said they did, compared to 9.7% across the UK, whereas 85.1% said they did not, compared to the UK figure of 81.5%. Some respondents gave qualified answers or were unsure.

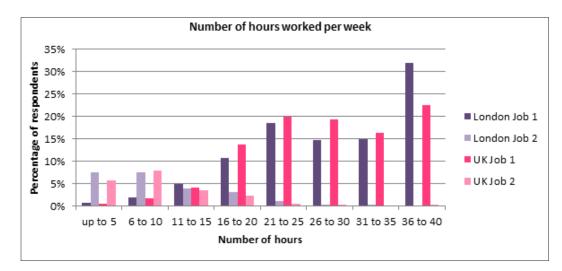
A similar proportion of respondents in London and in the UK as a whole thought that their salary reflected the role they have within the practice. 33% of London respondents thought their salary did reflect their role, compared to 35% for the UK, whereas 59% of London respondents gave a negative response, compared to 65% across the UK. Some respondents said that they were unsure or skipped the question.

Multiple jobs

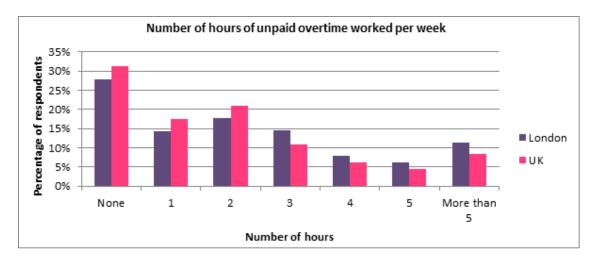
A higher proportion of respondents in London, 27.0%, reported that they had more than one job compared to the UK figure of 22.8%.

Working hours

The number of hours worked by respondents both in London and across the UK shows a broad spread. A greater proportion of respondents in London worked between 36 to 40 hours per week for their main job, 31.9% compared to 22.6% across the UK.



In general, respondents working in London said that they worked a greater number of hours of unpaid overtime per week compared to respondents across the UK.



Respondents in London generally reported working more unsocial hours compared to the UK as a whole, particularly during evening sessions (specified as after 6pm).

Unsocial hours worked	London	UK
Weekends	20.2%	18.5%
Evening sessions (after 6pm)	51.0%	32.6%

Annual leave

The number of days of annual leave that respondents are entitled to (pro rata) was slightly lower in London compared to the UK as a whole, including a greater proportion of respondents who have less than 20 days annual leave.

Number of days of annual leave	London	UK
19 or less	9.7%	7.5%
20	13.0%	9.0%
25	40.7%	43.0%
30	26.3%	27.6%
35	10.3%	12.9%

Indemnity cover

A similar proportion of respondents in London and the UK reported that their employer provided their indemnity cover, 65.2% and 66.4% respectively. 0.5% of respondents both in London and across the UK reported that they did not have any indemnity cover.

Job Title

The proportion of respondents that said that the job title 'General Practice Nurse' was used in their place of employment was greater in London at 41.8%, compared to 37.0% for the UK as a whole. The most commonly used alternative title amongst respondents working in London and across the UK was 'Practice Nurse'.

Line management

The position of respondents' line managers shows a similar spread for those working in London compared to the UK as a whole, with a slightly greater proportion of London respondents who said they reported to a Practice Manager or GP as opposed to a Senior Nurse.

'The number of days of annual leave that respondents are entitled to, was slightly lower in London compared to the UK as a whole.'

Position of line manager (Job 1)	London	UK
Senior Nurse	16.5%	23.5%
Practice Manager	52.4%	49.0%
Nurse Partner	3.1%	1.4%
General Practioner	29.6%	27.3%
Other	5.2%	4.4%

Annual appraisals

A slightly smaller proportion of respondents in London reported that they had an annual appraisal, whilst fractionally more said they 'sometimes' had an annual appraisal, compared to figures from across the UK. As described for the UK responses, the comments from respondents in London also showed that having an appraisal does not necessarily mean that it will be a high quality experience.

In receipt of annual appraisal	London	UK
Yes	77.5%	80.1%
No	2.7%	3.4%
Sometimes	19.9%	16.4%

Results for both the UK and London indicated that the annual appraisal was most commonly carried out by a GP, often in conjunction with a Practice Manager.

NMC revalidation

The proportion of respondents in London who had considered how they would meet the requirements of NMC revalidation was 77.2%, similar to the UK figure of 78.8%.

A greater proportion of London respondents reported that they had access to clinical supervision, compared to respondents working across the UK. Of those with access to clinical supervision, 63.8% could access this during working hours, compared to 60.7% for the whole of the UK.

Clinical supervision	London	UK
Yes	44.8%	37.9%
No	40.2%	41.2%
Sometimes	15.0%	20.9%

Qualifications

The proportion of respondents who reported that they held the NMC recordable Specialist Practice Qualification in General Practice Nursing was very similar for London compared to the entire UK dataset.

Qualification	London	UK
SPQ General Practice Nursing (NMC recordable qualification)	10.2%	10.6%
GPN Foundation programme	6.8%	3.3%
Advanced Nurse Practitioner (Primary Care)	9.2%	8.1%
Nurse Practitioner (Primary Care)	9.2%	8.8%

The percentage of respondents working in London who indicated that they were an independent prescriber was 31.4%, very close to the UK figure of 32.6%.

A greater proportion of respondents in London said that they were an NMC qualified mentor, 30.6% compared to the 25.8% across the UK. Respondents in London also show a trend for having updated their mentorship training slightly more recently than for the UK as a whole. However, the responses still showed that a significant proportion of those in London had not updated their mentorship training for more than three years and are likely to be out of date with the teaching and learning needs of students.

Most recent mentorship training update	London	UK
Within the last year	34.5%	30.0%
2 years ago	14.0%	12.4%
3 years ago	7.0%	6.8%
More than 3 years	44.4%	50.9%

Whilst the percentage of respondents who reported that their practice provided placements for medical students was similar for London and across the UK, the proportion providing placements for nursing students was even lower in London.

Provision of placements for students	London	UK
Medical students	58.9%	61.5%
Pre-registration nursing students	19.6%	27.0%

Professional development

The support from employers for professional development was broadly similar for respondents in London compared to those across the UK. A slightly greater proportion of respondents in London reported that their employer always supported or encouraged their professional development.

Support for professional development from employer	London	UK
Always	59.6%	57.4%
Sometimes	32.4%	36.2%
Rarely	5.5%	5.2%
Never	2.5%	1.2%

A smaller proportion of respondents in London said that their employer normally paid for their professional development, compared to the total UK figure.

'51.7% said they had to take annual leave or unpaid leave all or some of the time in order to access professional development.'

Payment for professional development	London	UK
My employer	47.2%	53.6%
Self-funding	4.7%	4.3%
A combination of sources	48.1%	42.0%

A greater proportion of London respondents said that they had a set number of days allocated by their employer to use for professional development, at 36.5% compared to 25.3% for the UK as a whole.

However, over half of respondents in London (51.7%) said they had to take annual leave or unpaid leave all or some of the time in order to access professional development, comparable to the UK figure of 48.0%.

Similar to the wider UK responses, just over a quarter of London respondents considered they had no gaps in their nursing knowledge. This leaves a large proportion of GPNs who have identified a need for further professional development.

General Practice Nursing as a career

When respondents were asked how their employer supported them to undertake the GPN role in their first job in general practice, a similar pattern of responses were selected by those in London and across the UK.

Support for new role as GPN	London	UK
Training	83.9%	82.2%
Induction	57.2%	62.1%
Observation of GPN	53.7%	53.3%
Preceptorship	21.0%	21.7%

During their pre-registration training, a greater proportion of respondents in London had observed a GPN as part of their community placement, 30.7% compared to 21.9% of respondents in the UK as a whole.

Home visiting

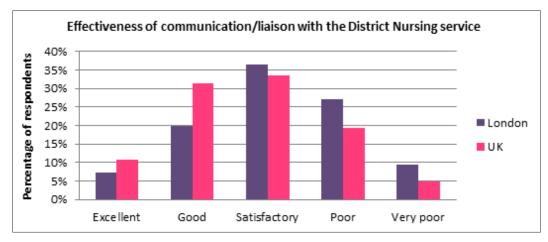
The proportion of respondents who said they undertook home visits was very similar for those working in London (39.5%) and across the UK (38.3%).

Multidisciplinary working

Respondents were asked to judge, from their experience, the effectiveness of communication with a number of other services. In the majority of cases, the ratings given by London respondents were very similar to those from across the UK (discharge planning services, emergency services, social services, allied health professionals, specialist nurse services, mental health services and others including Macmillan/Continence/ COPD). The largest differences were seen for liaison with the District Nursing service, where a larger proportion of respondents in London rated the communication as 'poor' or 'very poor'.

The QNI has reported previously on the extremely low numbers of nurses in London undertaking the Specialist Practice Qualification in District Nursing as part of the QNI annual District Nursing education audit (QNI, 2013;

QNI, 2014). Just five District Nurses qualified for the whole of London in the summer of 2013 and 25 qualified in the summer of 2014. Whilst the situation is improving year on year, and an even greater number of qualified District Nurses is reflected in the figures for 2015 (QNI, 2016), the legacy of poor of recruitment to the District Nurse programme may be felt for many years to come.



Referral to specialist services

Of those who responded to the question, 82.9% of London respondents said they were able to directly refer to specialist services, close to the UK figure of 81.4%. In addition, 97.5% of London respondents who answered the question said they were able to initiate investigations e.g. blood tests, compared to 93.8% from across the UK.

Participation in strategic development

61.6% of respondents in both London and the UK as a whole said that they participated in strategy or development meetings in their practice. The proportion of respondents working in London who represent General Practice Nursing at board level meetings was slightly higher than the 9.6% for the UK, but was still low at 12.0%.

Measurement of work

A large proportion of respondents to the survey skipped the question asking whether they know how their work was measured by the practice to report to commissioners. Of those who responded, 56% of those in London and across the UK did not know how work was measured for commissioners.

Conclusion

The survey responses from GPNs working in London are reflective of the overall UK responses in several areas, including workforce profile, satisfaction with salary, receipt of annual appraisals and support for professional development.

However, this report also highlights some differences between respondents in London and the UK as a whole. London respondents reported working more hours per week, more unpaid overtime, more evening sessions and greater workload pressures. Furthermore, communication with the District Nursing service was reported to be less effective by respondents in London compared to those from across the UK.

Despite the slightly greater proportion of NMC qualified mentors reported in London, less than a fifth of London respondents said their practice provided placements for pre-registration nursing students, even fewer than for the UK as a whole. This is of particular concern, especially given that more than a third of GPNs in London plan to retire by 2020. Growing the workforce will be challenging without substantive placements, supported by qualified mentors and sign-off mentors in practice.

'An increase is needed in the profile of General Practice Nursing as a specialist area of nursing and a rewarding career option for all.'

Required Actions

- 1. Consideration of the current and potentially greater contribution of General Practice Nurses, including Nurse Practitioners (NPs), in meeting the health needs of London's population, particularly in the context of declining numbers of General Practitioners.
- 2. A robust workforce plan to determine the numbers of GPNs (including NPs) required, to facilitate the development of the next generation of General Practice Nurses to meet the health needs of London's population.
- 3. An increase in the profile of General Practice Nursing as a specialist area of nursing and a rewarding career option for all including a target audience of applicants for nursing, student nurses and qualified nurses working in other areas.
- 4. An increase in the number of substantive student placement learning opportunities for student nurses who express an interest in pursuing a career in primary care, supported by an increase in the number of qualified mentors in the existing GPN workforce.
- 5. Structured support for those who are new to General Practice Nursing, including mentorship or preceptorship and appropriate support for skills development.
- 6. Consideration of the terms and conditions of the GPN workforce to ensure that they are commensurate with the scope and responsibilities of the role. This may include a benchmarking exercise in the London area.

References

QNI (2013) Report on District Nurse Education in England, Wales and Northern Ireland 2012/13. London: QNI.

QNI (2014) Report on District Nurse Education in the United Kingdom 2013-14. London: QNI.

QNI (2016) Report on District Nurse Education in the United Kingdom 2014-15. London: QNI.

QNI (2016) General Practice Nursing in the 21st Century: A time of opportunity. London: QNI.



The Queen's Nursing Institute 1A Henrietta Place London W1G 0LZ

> 020 7549 1400 mail@qni.org.uk www.qni.org.uk