Terms & Conditions of Nurses Working in General Practice:
South West London Practice Nursing Project

Dr Kevin Corbett

Project Manager/Senior Lecturer, Wandsworth PCT

Overview

- Background

- Terms & conditions

- Aims of the project

- Priorities

- Findings to date

London Assembly and Mayor of London Scrutiny Report: Access to Primary Care

"All Primary Care Trusts should provide support to practices in their areas to develop appropriate terms and conditions of employment for practice nurses, with the aim of developing generic nursing roles across the primary care spectrum…" (Recommendation 3, p.23)

London Assembly and Mayor of London Scrutiny Report: Access to Primary Care

" …This should include measures to ensure primary care staff have appropriate access to London Weighting, and to training and development opportunities…" (Recommendation 3, p.23)

London Assembly and Mayor of London Scrutiny Report: Access to Primary Care

" …This work should be coordinated across London by Strategic Health Authorities and Workforce Development Confederations, to ensure a degree of uniformity across the Capital." (Recommendation 3, p.23)

Terms & Conditions

"..the heart of the question is some of the real anomalies you find when you start looking how different practices reward different individuals and different skill levels. I think that is a PCT question..there are very clearly practice nurses with the same sets of skills earning different sums of money right across the patch. There are also anomalies between practice nurses and what they're paid, and community nurses and what they're paid…I have practice nurses that are grossly overpaid..and others who are grossly underpaid.." (Minutes 25th Sept 2003, Ian Ayres)

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"GPs that can afford better premises, provide opportunities and good salaries will attract nurses, and the surgeries that are unable to offer comparable terms and conditions will encounter recruitment and retention problems" (Minutes, 13th June 2003, Royal College of Nursing)

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"One of the things we're trying to do, working with the practices, is to recognise that to improve the quality of the GP, as employer - because that's at the heart of some of the problems - in the longer term, I would like to move the employment [of practice nurses] to [the] PCT and for it [practice nursing] to integrate into the skill mix, the development, the training, the support, with community nursing but to leave the alignment and the loyalty and the working relationship with the practice.." (Minutes 25th Sept 2003, Ian Ayres)

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"..It's not something we can move quickly because I don't want to break the good working relationships that are there, and there is some intense loyalty and some strong working relationships between practice nurses and the practices that they work within. *But GPs as employers are not always consistently good*." (My emphasis, minutes 25th Sept 2003, Ian Ayres)

Aims of the Project

- Provide support to general practices to develop appropriate terms & conditions of employment for practice nurses

- Assist in developing measures to ensure primary care staff have access to:
  - London Weighting
  - Training & development opportunities

Priorities

- Establish Project Steering/Reference Group
- Write & validate project plan
- Liaison with other sectors/working groups
- Join Primary Care Sub Group of SWLSHA
- Collect and analyse data
- Write report

Project Steering/ Reference Group

- Lead practice-employed nurses
- PEC chairs
- S.W. London Strategic Health Authority (SWLSHA)
- Primary Care Policy Leads in local PCT's
- Directors of Nursing
- Local Medical Committees

Terms & conditions

- Undertake *scoping exercise* to:
  - Identify current terms/conditions
    - London Weighting
    - Training & development opportunities
    - Appraisal
  - Mapping
    - Job titles
    - Competencies/regular performance

Scoping Exercise

- Random sample of practice-employed nurses (n=61)

- Across practices in five Primary Care Trust areas

- Sampling frame based on local knowledge of:
  - Numbers of practice-employed nurses (N=573)
  - Existing skill mix (HCA, PN, CNS, NP)
  - (List size found not to correlate with number/ skill mix of practice-employed nurses)

PCT	HCA	PN	CNS	NP	Total
Wandsworth	-	116	-	2	118
Sutton & Merton	11	154		10	175
Kingston	2	59		4	67
Richmond & Twickenham	22	63	-	-	65
Croydon	-	148	2	-	148
Total	35	540	2	16	573

PCT	HCA* No.sent/received [%response]	PN* No. sent/received [%response]	CNS* No. sent/received [%response]	NP* No. ent/received [% response]	Totals sent/received [% response]
Wandsworth	0/0 [0%]	26/11 [42.3%]	0/0 [0%]	2/0 [0%]	28/11 [39%]
Sutton & Merton	13/1 [7.7%]	32/14 [43.7%]	2/0 [0%]	8/2 [25%]	55/17 [30.9%]
Kingston	1/0 [0%]	14/7 [50%]	2/0 [0%]	4/1 [25%]	21/8 [38%]
Richmond & Twickenham	6/2 [33%]	13/6 [46%]	0/0 [0%]	0/0 [0%]	19/8 [42%]
Croydon	0/0 [0%]	7/17 [242%]**	0/0 [0%]	0/0 [0%]	7/17 [242%]**
Totals	20/3 [15%]	102/55 [53.9%]	4/0 [0%]	14/3 [21%]	140/61 [43.6%]
Mean % response	10%	45.5%	0%	12.5%	78.4%**

Findings to date -1

- Varied response rate
  - Good for practice nurses >45 percent (n=55)
  - 'Poor' response for HCA, CNS, NP
- Skill-mix in practice-employed nurses
- Across five PCT areas > 500 qualified practice-employed nurses

Findings to date - 2

- Skill mix due to investment practice of partners?
- List size doesn't tightly correlate with numbers/skill mix

Findings to date - 3

- 59 qualified respondents (n=59) gave 13 job titles
- Job title no indicator of grade/salary
- Job titles are variations on 5 types:
  - Practice Nurse
  - Senior Practice Nurse
  - Nurse Practitioner
  - Specialist Practitioner
  - Nurse Manager

Findings to date - 4

- Data-bases of practice-employed nurses don't show:
  - skill mix, job title & grade
- Teaching & assessing only regularly performed by practice-employed nurses (on average) in one PCT area