

# New primary care contracts – what they mean for employers of nurses in general practice

## Introduction

New contracts for primary care come into effect from April 2004.

The new arrangements are a key element of the Government's plans to deliver more and better quality primary care services to patients. They are backed by significant new investment.

Under the new arrangements, PCTs will enter into contracts with practices and other providers. In the past, they have been able to enter into direct contracts with GPs under Personal Medical Services (PMS) arrangements. However, the majority of GPs have operated to a national contract – the

General Medical Services (GMS) contract – over which PCTs have had no say.

*This factsheet explains what the new contracts mean for those employing nurses and outlines the changes that practices may need to make as a result.*

## What the changes mean for nursing staff

What the changes mean for those employing nurses

The new primary care contracting arrangements will affect the whole of the practice team – and especially nurses. They will mean:

- Better opportunities to improve the quality of care patients get and their health outcomes.
- Better employment conditions, such as access to CDP and professional advice, which will ensure greater safety for patients
- More services provided locally with more doctors and more nurses in primary care.
- Greater freedom for practices to decide how to design their services,

including the option to transfer the responsibility of non-compulsory services (known as 'enhanced' or 'additional' services) such as out-of-hours provision to PCTs.

- Flexibility and incentives for GMS practices to provide more services for patients, including those traditionally done in hospital. PMS contracts have always offered these.
- Practices will be resourced and rewarded on the basis of how well they care for patients rather than the number of patients they treat. GMS practices will be rewarded through the use of a Quality Outcomes Framework (QOF) and PMS contractors on the basis of a

locally-devised system which will typically be based on QOF.

- Better use the skills of the whole team, especially nurses, with greater career development, more control over workload and more say in decisions about their services.
- New opportunities for a wider range of nurses to work in general practice.
- Better employment conditions for nurses which will ensure greater safety for patients
- Incentives for PCT-employed and practice-employed nurses to work more closely together to improve the quality of patient care.

## Specific implications for those employing nurses

Under the new arrangements:

- Nurses will be key to delivering the QOF set out in the new GMS contract. Employers need to think about how they can incentivise their nurses to earn QOF points.
- Nurses can become partners in GMS practices, just as they currently can in PMS practices.
- Nurses can fill posts previously held by GPs.
- Nurses can become providers of the additional and enhanced services
- There are measures to improve the employment of nurses, including better recruitment and selection, access to clinical supervision, training and professional development and appraisal.
- Nurses and the PCT professional lead should be involved in decisions about nursing services in practices.
- Greater skill mix and flexibility is allowed and encouraged so that nurses can extend their roles to meet needs of patients, be freed up to use their skills most effectively and have better career opportunities.
- Nurses in primary care can work collaboratively with colleagues in other sectors.

# How to maximise the benefits of the new contracts

Employers must ensure they involve nurses in decision-making in the practice. This will secure their commitment and help to ensure the benefits of the new contract are delivered. The amount of change a practice needs to make will depend on their current employment practices – the best employers will already be working in this way.

Employers will need to:

- Improve employment of nurses
- Review employment practices – improving conditions for nurses will help you recruit and retain the best nurses.
- Make sure you understand the professional accountability of nurses and your duty to enable them to perform safely.
- Provide access to education and training so that the nurse is competent to do their job they have been employed to do. See part 4 of the NHS England [General Medical Services Contracts] Regulations, paras 58 & 59, pg 64.
- Work with each nurse to review performance, identify learning needs, provide access to clinical supervision and carry out their appraisal.

- Make sure you reward nurses for their responsibilities appropriately using the principles of Agenda for Change and the Skills & Knowledge Framework. See pg 28, paras 4.19 of the contract – Investing in General Practice, The New General Medical Services Contract, DH 2003.  
<http://www.dh.gov.uk/PolicyAndGuidance/HumanResourcesAndTraining/ModernisingPay/GPContracts/fs/en> and  
<http://www.dh.gov.uk/PolicyAndGuidance/HumanResourcesAndTraining/ModernisingPay/AgendaForChange/fs/en>
- Use the PCT lead nurse for advice and information on safe employment practice and on developing new roles. They will have systems that you can tap into and tools you can use.

## *Developing nursing*

- Remember that this is a practice contract not a GP contract.
- Involve the nurses in your practice in discussions about the contract and in monitoring reviews with the PCT. See pg 28, paras 4.19 iv, of the contract – Investing in General Practice, The

New General Medical Services Contract, DH 2003.

<http://www.dh.gov.uk/PolicyAndGuidance/HumanResourcesAndTraining/ModernisingPay/GPContracts/fs/en>

- Work with other practices and the PCT to redesign nursing roles and identify the competencies you need to ensure patient safety.
- Include feedback on nursing services in your patient surveys.
- Remember that, in the future, more nurses will become partners, run services and deliver the services practice opt out of. Help them to gain experience in leading services and in meeting the requirements of commissioners to prepare them for these roles.
- Use a range of policies and initiatives to help nurses develop new roles and to improve your practice skill mix safely. These include the national strategy for nursing – Make A Difference, which describes expansion of nursing practice, including nurse prescribing and CNO's 10 key roles; nurses with a special interest and Liberating the Talents, the framework for nurses working primary and community care.

## Where to go for more information

GMS: [http://www.dh.gov.uk/PolicyAndGuidance/HumanResourcesAndTraining/ModernisingPay/GPContracts/s/GPContractsArticle/fs/en?CONTENT\\_ID=4068601&chk=6d6f3H](http://www.dh.gov.uk/PolicyAndGuidance/HumanResourcesAndTraining/ModernisingPay/GPContracts/s/GPContractsArticle/fs/en?CONTENT_ID=4068601&chk=6d6f3H)  
PMS: <http://www.dh.gov.uk/PolicyAndGuidance/OrganisationPolicy/PrimaryCare/PersonalMedicalServicesPilots/fs/en>  
[www.natpact.nhs.uk](http://www.natpact.nhs.uk)  
[www.npdt.org](http://www.npdt.org)

Agenda for Change:

<http://www.dh.gov.uk/PolicyAndGuidance/HumanResourcesAndTraining/ModernisingPay/AgendaForChange/fs/en>  
[http://www.dh.gov.uk/PublicationsAndStatistics/PressReleases/PressReleasesNotices/fs/en?CONTENT\\_ID=4024519&chk=z8tIpO](http://www.dh.gov.uk/PublicationsAndStatistics/PressReleases/PressReleasesNotices/fs/en?CONTENT_ID=4024519&chk=z8tIpO)

Nurse prescribing:

<http://www.dh.gov.uk/PolicyAndGuidance/MedicinesPharmacyAndIndustryServices/Prescriptions/fs/en>

Nurses with special interests –

[www.natpact.nhs.uk/special\\_interests](http://www.natpact.nhs.uk/special_interests)

Liberating the Talents:

[http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT\\_ID=4070100&chk=h1nBxL](http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT_ID=4070100&chk=h1nBxL)

The MA will be supporting nurses to contribute to the successful implementation of the new GMS and PMS contract in a number of different ways. To launch this programme of work two conferences are to be held on nursing and new GMS and PMS to raise awareness about the content of these two new contracts and their potential implications for nurses and nursing. These events will be held in London on 10 March and in York on 18 March 2004. For further details please log onto [www.natpact.nhs.uk/events](http://www.natpact.nhs.uk/events) There is

no charge to attend these events.

Further workshops for nurses are planned across the nine NatPaCT areas between May and September. More information about these events will be available on the CNO, NatPaCT and MA websites in due course.

For information on the full programme of support to implement these new contracts please refer to the prospectus of support available to download from [www.natpact.nhs.uk/primarycarecontracting](http://www.natpact.nhs.uk/primarycarecontracting)

The MA (NatPaCT) programme is supported by Nicola Walsh, Senior Nurse Advisor working across the primary care contracting programme, and by Primary Care Contracting Advisors providing local support. Contact details for the Primary Care Contracting Advisors are in the prospectus.