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| Document Details |
| Title | Governance Framework For Training and Education in Primary Care |
| Author | Heather Glover Cheshire Training Hub |
| Ref no: | GFTE1 |
| Version | 1 |
| Approval process |
| Approved by | Vernova Federation – Justin Johnson. Cheshire CCG – Dean Grice, Amanda Best. Cheshire E & W TH Lead – Trish Atkinson. Cheshire South & Vale Royal TH Lead – Tricia Vickers. |
| Date approved | October 2020 |
| Document Category |  |
| Review Frequency | Annually  |
| Distribution |
| Who the policy will be distributed to? | All Cheshire Primary Care Networks |
| Method | Cheshire & Merseyside Training Hub |
| Document Locator  | Cheshire & Merseyside Training Hub Website |
| Nominated Personnel (if applicable) |
|  The Practice Manager/Practice Operational Manager at each surgery |
| Review |
| Review date: | Reviewed by: | Brief details of amendments made: |
| 4/2/21 | H Glover |  Addition to Career opportunities and roles within Primary Care, page 17 |
|  |  |  |
|  |  |  |
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**Governance Framework for Training and Education in Primary Care**

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**Training and Education Framework for Primary Care**

1. **Introduction**

General practice and primary care is becoming increasingly complex. General practice remains patient, family and community centred, with the family physician at the core - but to provide the required service in a manner that is safe for patients and sustainable for the future, and enjoyable for those working in primary care, a multidisciplinary team is vital. The underpinning purpose of this framework is that NHS organisations and the multidisciplinary team within must work together and with others to share the common resources available for meeting the health needs of the population through the training and development necessary for future success.

Primary care, together with the rest of the NHS, are working towards a more integrated delivery of services as discussed in the King’s Fund report (2015), and focus on a place-based system of care. The primary care workforce therefore, are developing and expanding the roles and expertise offered, with greater collaboration within Primary Care Networks (PCN), and this emphasises the need for the provision of a standardised approach to training and education of the whole PC multidisciplinary team.

This framework aims to provide a standardised multidisciplinary approach for the learning and development of employees in primary care throughout Cheshire. The basis for this being the document commissioned by Vernova on behalf of East Cheshire GP Practices which defined the recommendations presented into a Learning and Development Governance Framework (2015). It is underpinned by a Learning Management System (LMS) and reflects relevant legislation requirements. Best practice, CQC and QOF compliance add to the foundation of this document. Within the framework there are links to several resources to support training and education, and to evidence the requirements illustrated in the tables throughout. In keeping with Health Education England; healthcare education and training must be well-led, effectively managed and provide supportive learning environments that enable opportunities for the current and future healthcare workforce to develop the knowledge, skills, values and behaviours to deliver the highest quality patient care. The framework includes the following:

* Induction
* Statutory and Mandatory training
* Role Specific training
* Optional training for career development
* GPN training
* Appraisal and succession planning

The overarching objective of this framework is to support with the growth and development of the primary care workforce in collaboration with the Cheshire & Merseyside Training Hub whose aim is to; create an engaged and empowered workforce, establish career pathways in all parts of the system and to become a more attractive career choice. It sets out the expectations for each of the roles in both skills and educational requirements which will assist with workforce planning and educational commissioning. It will enable practitioners to plan and develop careers and will assist employers in identifying the skills and education required to provide high-quality care. In order to ensure that primary care can continue to meet the challenge of growing a workforce fit for both practice and purpose, increasing the capacity and capability of all employees is essential.

Topic areas can either be delivered via e-learning, face to face or via a blended approach. Available e-learning providers are indicated. If a blended approach is suitable this is indicated where applicable. For face to face training the [Professional Development Directory](https://www.cmthub.co.uk/wp-content/uploads/2020/12/Professional-Development-Directory-for-Primary-Care.docx) lists providers. The tables highlight how often each individual staff group working within the primary care setting need to attend training dependant on their role.

**1.1 Training Hub**

The Governance Framework for Training and Education in Primary Care has been developed by the Cheshire Training Hub in order to standardise the training offered and available to all employees within primary care. This is a document designed to signpost and will facilitate managers, supervisors and all healthcare staff to access appropriate opportunities to develop a workforce that is engaged, empowered and sustainable for the future.

The overarching objective of the Training Hubs is to support with the growth and development of the primary care workforce. We aim to achieve this by; Becoming a more attractive career choice, creating an engaged and empowered workforce, and by establishing [career pathways](https://www.cmthub.co.uk/employers/) in all parts of the system. From 2018, through the development of The Cheshire Training Hub, there are 5 hubs working collaboratively. Each of the [Training Hub Contacts](https://www.cmthub.co.uk/contact-us/) can provide further information for opening up as a training practice to ensure the necessary support for future success.

1. **Induction Programme –** to start within the first few days of employment

The new employee will be allocated a named individual within the Practice/Cluster/Federation who is their main point of contact and who will support them through the programme (Table 1). This should also be supported by their Lead / manager within the Practice/Cluster/Federation for General Practice. An overview of the health and care system will be provided, with additional information available at the [North West Academy for Primary Care](https://www.nwacademy.nhs.uk/discover/primary-care).

Some elements of the induction may take up to twelve months to complete including elements of orientation, training and education. If the individual has specific gaps in knowledge or competence that need to be addressed, it may take longer. At an early stage in their induction programme, the employee and supervisor / manager should map the employee’s current knowledge and skills against the requirements of the post. The named individual should be available to support in the development of the new employee’s personal development plan (PDP). The PDP should be completed within the initial induction period and form a basis for the employer and employee to sign up to a development plan to meet any identified learning needs. Additional training needs assessment should be completed using resources available, for example the Cheshire & Merseyside [GPN Resource Pack](file:///%5C%5Cuc-uk1-fs-03.xnhsuk1.nhs.uk%5CHome%5CPriorslegh%5CHeather.Glover%5CDownloads%5CGPN%20Resource%20Pack%20V3.5%20FINAL.pdf) (Page 20)

Keeping a record of the induction should include a signed core induction checklist and a completed role specific induction checklist and learning plan. This will help the practice demonstrate compliance with GMS Quality and Outcome Framework standards.

Supervision should be in place to support: Agreeing learning objectives with the individual and the practice; providing time for regular supervisory sessions (Review should take place at 3, 6, 9 months the final review at 12months, this can be extended if it is discussed and agreed); Facilitating access to learning opportunities (which may include visits outside the practice); Observing practice and encouraging critical reflection on performance; Providing structured feedback to the individual and identifying further learning needs. Supervision should normally be time limited and is not a substitute for more formal learning where that is indicated.

Preceptorship is a period of structured transition for the newly registered practitioner during which they will be supported by a preceptor, to develop their confidence as an autonomous professional, refine skills, values and behaviours and to continue on their journey of life-long learning. It is a crucial area of support, as the first year in practice as a GPN as this is often a stressful time. The learning that has occurred at university, in order to develop a level of knowledge and proficiency in nursing, produces highly motivated and professional individuals. It is acknowledged that the realistic nature of practice, however, with its resource issues and other frustrations can also be quite challenging. A good preceptor will be someone who will support the consolidation of knowledge and skills attained by the newly qualified GPN.

The NHS England and Improvement fellowship scheme, which is offered through the Training hub is for all GPs and GPNs within the first year from qualifying. This is a two year funded fellowship programme that offers nurses and GPs the opportunity to expand their learning and access mentorship, coaching and networking opportunities. The programme also requires exposure to PCN working to allow fellows to learn more about PCN and MDT working. Educational support is offered throughout the programme, however please note that this does not include additional clinical education. The fellowship programme will enable newly qualified nurses to consider primary care as a first destination role. All learners who meet the eligibility requirements can join the programme. More details are available through your Training Hub.

All health care staff should complete a mandatory session of safeguarding at least 30 minutes in duration in the general staff induction programme or a specific session within six weeks of taking up post within a new organisation. This should provide key safeguarding/child protection information, including appropriate action to take if there are concerns. This mandatory induction session is separate and a pre-cursor to level 1 training, although many may choose to incorporate this within a level 1 training package.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Corporate Induction** | **Frequency** | **Face to Face / Virtual training** | **Available Online learning provider**[Relias](https://www.relias.co.uk/)[**E-Learning for Health**](https://www.e-lfh.org.uk/programmes/)[Bluestream Academy](https://www.bluestreamacademy.com/) | **GP Partners** | **Salaried GPs** | **Masters Level ACP/AHP** | **Nurse Practitioners** | **Practice Nurse** | **Nursing Associate** | **Physician Associate** | **Paramedic** | **HCA** | **Management** | **Admin** |
| **Introduction to practice/organisation**Username & Logins for all necessary electronic resources | once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Location of emergency equipment** & BLS \* | Annual | √ | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Sickness & Absence reporting procedures** | once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Dress code requirements** | once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Departmental risks & health & Safety responsibilities**Duty of Candour 6Cs Dignity & RespectInformation Governance  | once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Statutory & Mandatory**Requirements &training | Induction, then as Table 2 |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Human Resource Policies:**Annual leave entitlement Fire procedures Location of Policies &ProceduresComplaints & Grievance ProcedureAppraisal Values & Behaviours Use of specific equipment & proceduresClinical procedures & policiesInfection Control | once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **The Care Certificate** | once | √ | [Care Certificate](http://www.skillsforhealth.org.uk/images/projects/care_certificate/Care%20Certificate%20Standards.pdf) |  |  |  |  |  |  |  |  | √ |  |  |
| **Individual bespoke practice topics** e.g. Wellbeing & Staff Engagement | once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Identification of any Special Requirements** | once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Networking / Peer Support** |  |  |  | √ | √ | √ | √ | √ | √ | √ | √ |  | √ |  |
|  | **Table 1** |

**2.1 Statutory and mandatory training**

Table 2 defines the content for a consistent Statutory and Mandatory training programme for all staff working in Cheshire GP Practices. The subjects defined can either be delivered via e-learning, face to face or via a blended approach. Blended learning, combining e-learning with face-to-face experiences, can provide the essential combination of social, emotional and physical elements of learning. Available e-learning providers are indicated. If a blended approach is suitable then this is indicated where applicable. For face to face training the [Professional Development Directory](https://www.cmthub.co.uk/wp-content/uploads/2020/12/Professional-Development-Directory-for-Primary-Care.docx)  lists providers under the Learning Repository on The Cheshire and Merseyside Training Hub website. E-learning remains central to our blended approach for education and training in Cheshire and primary care now utilises nationally aligned e-learning content as part of its mandatory training offer on Relias, Blue Stream Academy and e-learning for health (platform links are available in the tables).

Since 2013, the [Core Skills Training Framework](file:///%5C%5Cuc-uk1-fs-03.xnhsuk1.nhs.uk%5CHome%5CPriorslegh%5CHeather.Glover%5CDocuments%5CCheshire%20Training%20Hub%5CTraining%20Hub%20Support%20Pack%5CCSTF%20England%20Subject%20Guide%20v1.0%20Feb%2020.pdf) (CSTF) has become widely recognised as a national minimum standard for statutory and mandatory training in the health sector. Health Education England and Skills for Health are now working in partnership to further develop the CSTF, to ensure the scope remains relevant to the future workforce. The aim is to clarify and consolidate current CSTF guidelines with the expectation that all NHS Trusts in England will ultimately be aligned to the CSTF, and to enable the more effective ‘portability’ of training records and efficiencies in staff movement.

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| **Statutory and Mandatory Training** | **Frequency** | **Face to Face / Virtual training** | **Available Online learning provider**[**Relias**](https://www.relias.co.uk/)[**E-Learning for Health**](https://www.e-lfh.org.uk/programmes/)[**Bluestream Academy**](https://www.bluestreamacademy.com/)[**Skills for Health**](http://www.skillsplatform.org/) | **GP Partners** | **Salaried GPs** | **Masters Level ACP/AHP** | **Nurse Practitioners** | **Practice Nurse** | **Nursing Associate** | **Physician Associate** | **Paramedic** | **HCA** | **Management** | **Admin** |
| **Chaperoning** | 3 yrly |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Equality, Diversity & Human Rights** | 3 yrly |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Health, Safety & Welfare** | 3 yrly |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Fire Safety** Level 1 | Annual |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Conflict Resolution** | 3 yrly |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Infection Prevention & Control**  |  |
| * All Healthcare staff
 | Annual |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Manual Handling** |  |
| * L1 All Staff
 | 3 yrly |  | Available online see above |  |  |  |  |  |  |  |  |  | √ | √ |
| * L2 Healthcare staff
 | Annual |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |  |
| **Information Governance** | Annual |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Resuscitation \*** | [Resuscitation Council UK](https://www.resus.org.uk/quality-standards/primary-care-quality-standards-for-cpr/#training) |
| * Basic Life Support, CPR & Defib (Adult & child) Level 2
 | Annual | √ | Available online see above – to support hands on training and assessment undertaken annually | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | Risk assess role |
| * Anaphylaxis
 | Annual | √ | Available online see above – to support hands on training | √ | √ | √ | √ | √ | √ | √ | √ | √ |  | Risk assess role |
| **Mental Capacity Act** | Annual |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **DCSETF: Dementia Awareness** | Annual |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Understanding RIDDOR** | Annual |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **Bullying and Harassment** | Annual |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
|  | Table 2 |

\*Resuscitation Council (UK) guidelines: All staff in a primary care, including non-clinical staff, should undergo training which must be in place at induction and appropriately frequent intervals, to ensure staff can undertake CPR of both adults and children to the level appropriate to their role.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Statutory and Mandatory Training** | **Frequency** | **Face to Face / Virtual training** | **Available online provider**[**Relias**](https://www.relias.co.uk/)[**E-Learning for Health**](https://www.e-lfh.org.uk/programmes/)[**Bluestream Academy**](https://www.bluestreamacademy.com/) | **GP Partners** | **Salaried GPs** | **Masters Level ACP/AHP** | **Nurse Practitioners** | **Practice Nurse** | **Nursing Associate** | **Physician Associate** | **Paramedic** | **HCA** | **Management** | **Admin** |
| **Safeguarding Adults \*** |  | **Safeguarding Adults Level 3: staff need an 8 hour initial training, then 3 yearly refreshers of 8 hours (or this can be split and delivered annually)** |
| * L1 (All Staff)
 | 3 yearly |  | Available online see above |  |  |  |  |  |  |  |  |  | 2 hours | 2 hours |
| * L2 (Practitioners in regular contact with public & families)
 | 3 yearly |  | Available online see above |  |  |  |  |  |  |  |  | 3-4 hours |  |  |
| * L3 (Registered Healthcare staff assessing patients)
 | 3 yearly**See above** | 50% | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ |  |  |  |
| * L4 & 5 (Specialist roles Named/Designated)
 | 3 yearly | √ | Available online see above | 24 hrs |  |  |  |  |  |  |  |  |  |  |
| **Safeguarding Children \*\*** |  | **Safeguarding children Level 3: staff need an 8 hour initial training, then 3 yearly refreshers of 8 hours (or this can be split and delivered annually)** |
| * L1 (All Staff)
 | 3 yearly |  |  |  |  |  |  |  |  |  |  |  | 2 hours | 2 hours |
| * L2 (Non-clinical & clinical staff with any contact with children)
 | 3 yearly |  | Available online see above |  |  |  |  |  |  |  |  | 4 hrs |  |  |
| * L3 (All clinical staff working with children)
 | 3 yearly**See above** | 50% | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ |  |  |  |
| * L4 & 5 (Specialist roles Named/Designated)
 | 3 yearly | √ | Available online see above | 24 hours |  |  |  |  |  |  |  |  |  |  |
|  | **Table 2 continued** |

This  [Safeguarding Training](https://www.virtual-college.co.uk/resources/free-courses) link provides some free specific safeguarding online learning and for a small fee, level 2 or 3 safeguarding courses can be accessed as required.

1. **Role Specific Training**

Role specific training and its frequency has multiple determining factors. For example, training maybe required as a result of Statutory and Mandatory regulations, be specific to a role, Continuous Professional Development (CPD), CQC requirements or best practice etc. More recently, the ways in which we work and learn has been heavily influenced by Covid-19 with much emphasis being placed on the virtual working / learning environment.

Areas of learning identified will be determined by the outcome of the appraisal process, personal development plans, local and national legislative recommendations, plus individual practice requirements. Topics can either be delivered via e-learning, face to face delivery or via a blended approach where this is appropriate.

Role specific training can be divided into clinical and non-clinical subjects. Examples of both are illustrated in Tables 3 and 4 below. These are not prescriptive and other learning may also be required. Clinical role specific training will be determined by the role of the clinician and any relevant legislation or best practice for that role and any specific practice requirements. The Cheshire & Merseyside Training Hub website has captured many of the different training opportunities available.

Funds for continual professional development may be available through PCNs or Training Hubs. If you would like to find out if funding is available for training, contact your locality [Training Hub .](https://www.cmthub.co.uk/contact-us/)

**Table 3: Role Specific Clinical Training**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Role Specific Clinical Training** | **Frequency** | **Face to Face / Virtual training** | **Available Online learning provider**[**Relias**](https://www.relias.co.uk/)[**E-Learning for Health**](https://www.e-lfh.org.uk/programmes/)[**Bluestream Academy**](https://www.bluestreamacademy.com/)[**Skills for Health**](http://www.skillsplatform.org/)[**Immunisation Green Book**](https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book) | **GP Partners** | **Salaried GPs** | **Masters Level ACP/AHP** | **Nurse Practitioners** | **Practice Nurse** | **Nursing Associate** | **Physician Associate** | **Paramedic** | **HCA** | **Management** | **Admin** |
| **Care Certificate** (commence upon induction) | Once | √ | [Care Certificate](http://www.skillsforhealth.org.uk/images/projects/care_certificate/Care%20Certificate%20Standards.pdf) |  |  |  |  |  |  |  |  | √ |  |  |
| **Immunisation Training** |  |   [Immunisation Training](https://www.e-lfh.org.uk/programmes/immunisation/)  |
| * Initial course
 | Once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ | √ |  |  |
| * Update training
 | Annual | √ | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ |  |  |
| **Clinical Excellence in Ear Care** |  |  |
| * Initial course
 | Once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ |  |  |  |
| * Update training
 | 3 years |  |  | √ | √ | √ | √ | √ | √ | √ | √ |  |  |  |
| **Cytology** |  |  |
| * Initial course
 | Once | √ |  | √ | √ | √ | √ | √ | √ | √ |  |  |  | Risk assess role |
| * Update training
 | 3 years |  | Available online see above | √ | √ | √ | √ | √ | √ | √ |  |  |  |
| **Venepuncture** |  |  |
| * Initial course
 | Once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ |  |  |  |
| * Update training
 | 3 years | √ |  | √ | √ | √ | √ | √ | √ | √ | √ |  |  |  |
| **HCA National Minimum Training Standards** | Once |  |  |  |  |  |  |  |  |  |  | √ |  |  |
| **Basic Wound Care** | Once | √ | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ |  |  |
| **Vitamin B12** |  |  |
| * Awareness
 | Once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ | Risk assess role |  |  |
| * Administration
 | Once | √ |  | √ | √ | √ | √ | √ | √ | √ | √ |  |  |
| **Control of Substances Hazardous to Health** | Risk assess |  | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ | √ |  |  |
| **Medicines Management** | CPD assess | √ | Available online see above | √ | √ | √ | √ | √ | √ | √ | √ |  |  |  |
| **Medical Devices** | Device driven | √ |  |  | √ | √ | √ | √ | √ | √ | √ | √ |  |  |
| **Sexual Health/Family Planning** | CPD assess | √ |  | √ | √ | √ | √ | √ | √ | √ |  |  |  |  |
|  | Table 3 |

**Table 4: Role Specific Non-Clinical Training**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Role Specific** **Non-Clinical Training** | **Frequency** | **Face to Face / Virtual training** | **Available Online learning provider**[**Relias**](https://www.relias.co.uk/)[**E-Learning for Health**](https://www.e-lfh.org.uk/programmes/)[**Bluestream Academy**](https://www.bluestreamacademy.com/)[**Skills for Health**](http://www.skillsplatform.org/)[**E-GP Learning**](https://egplearning.co.uk/quick-telephone-consultation-tips-for-primary-care/) | **GP Partners** | **Salaried GPs** | **Masters Level ACP/AHP** | **Nurse Practitioners** | **Practice Nurse** | **Nursing Associate** | **Physician Associate** | **Paramedic** | **HCA** | **Management** | **Admin** |
| **Appraisal/Appraisee Training** | CPD determined |  |  | √ | √ | √ | √ | √ | √ | √ | √ |  | √ |  |
| **Coaching Skills** | CPD determined |  |  | √ | √ | √ | √ | √ | √ | √ | √ |  | √ |  |
| **Customer Care** | CPD determined |  |  | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **GP Assistant** | Once | √ | [E-Lfh. GP Assistant](https://www.e-lfh.org.uk/programmes/general-practice-assistant/)  |  |  |  |  |  |  |  |  | √ |  |  |
| **Emotional Resilience** | CPD determined |  |  | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ | √ |
| **First Aid** (Designated first aiders) | Annual |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Lean Thinking** | CPD determined |  |  | √ | √ | √ | √ | √ | √ | √ | √ |  | √ |  |
| **Skills for People Management** | CPD determined |  |  |  |  |  |  |  |  |  |  |  | √ |  |
| **Supervisor/Assessor update** | Annual | √ | Available online see above |  |  | √ | √ | √ | √ |  |  |  |  |  |
| **Team Leader Programme** | CPD determined |  |  |  |  | √ | √ | √ |  |  |  |  | √ |  |
| **Telephone Consultation for PC** | Once |  | Available online see above | √ | √ | √ | √ | √ |  | √ |  |  |  |  |
| **Quality Improvement** |  |  |  | √ | √ | √ | √ | √ | √ | √ | √ |  | √ |  |
| **Population Health Management** |  |  |  | √ | √ | √ | √ | √ | √ | √ | √ |  | √ |  |
|  | Table 4 |

1. **Optional Training**

Personal and professional development helps to manage learning and growth throughout the career of all healthcare employees. Continuous learning helps open up new doors, maintains skills and knowledge and ensures safe and legally compliant practice. The Knowledge and Skills Framework (KSF) provides opportunities for NHS staff to extend their skills and take on new responsibilities. Across Cheshire and Merseyside partnerships are evolving to form integrated care systems. In an integrated care system, NHS organisations in partnership with local councils and others, take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve. Optional training helps to address and respond to workforce needs, promotes careers and engagement, considers individual education and development and identifies workforce requirements for service delivery. Examples of further training are illustrated in Table 5 below. This is not a prescriptive list and other learning may be relevant or required.

**Table 5: Optional Training**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Optional Training** | **Frequency** | **Face to Face / Virtual training** | **Available Online learning provider**[**Relias**](https://www.relias.co.uk/)[**E-Learning for Health**](https://www.e-lfh.org.uk/programmes/)[**Bluestream Academy**](https://www.bluestreamacademy.com/)[**E-GP Learning**](https://egplearning.co.uk/quick-telephone-consultation-tips-for-primary-care/)[**Education For Health**](https://store.educationforhealth.org/catalog.php)[**Clinical risk management training**](https://digital.nhs.uk/services/solution-assurance/the-clinical-safety-team/clinical-risk-management-training)[**H&S Gov.uk**](https://www.hsl.gov.uk/health-and-safety-training-courses#top) | **GP Partners** | **Salaried GPs** | **Masters Level ACP/AHP** | **Nurse Practitioners** | **Practice Nurse** | **Nursing Associate** | **Physician Associate** | **Paramedic** | **HCA** | **Management** | **Admin** |
| **Long Term Conditions courses / modules** |  |
| * Palliative Care
 | once | √ |  |  |  |  | √ | √ | √ | √ | √ |  |  |  |
| * Diabetes
 | once | √ |  |  |  |  | √ | √ | √ | √ | √ |  |  |  |
| * Asthma
 | once | √ |  |  |  |  | √ | √ | √ | √ | √ |  |  |  |
| * Cardiovascular Disease
 | once | √ |  |  |  |  | √ | √ | √ | √ | √ |  |  |  |
| * COPD
 | once | √ |  |  |  |  | √ | √ | √ | √ | √ |  |  |  |
| * Spirometry
 | once | √ |  |  |  |  |  |  |  |  |  |  |  |  |
| * Atrial Fibrillation & Stroke Prevention
 | once | √ |  |  |  |  | √ | √ |  |  |  |  |  |  |
| **Advanced Clinical Practice** | once | √ |  |  |  |  | √ | √ |  |  | √ |  |  |  |
| **Virtual Working** | once |  |  | √ | √ | √ | √ | √ | √ | √ |  |  | √ | √ |
| **Leadership** | once | √ |  | √ | √ | √ | √ | √ |  | √ | √ |  | √ | Role dependant |
| **Clinical Team Leadership** | once | √ |  | √ | √ | √ | √ |  |  | √ | √ |  |  |
| **Evidence Based Healthcare** | once | √ |  |  |  |  | √ | √ | √ |  | √ |  |  |  |
| **Customer Service Essentials** | once | √ |  |  |  |  |  | √ | √ |  | √ | √ | √ | √ |
| **Clinical Supervision** | once | √ |  |  |  | √ | √ | √ | √ |  |  |  |  |  |
| **European Computer Driving Licence** | once |  | [EDCL Online Training](http://www.ecdl-training.co.uk/) |  |  |  |  |  |  |  |  |  | √ | √ |
| **Health & Safety training** | CPD determined |  | Available online see above |  |  |  |  |  |  |  |  |  | √ |  |
|  | Table 5 |

1. **Table 6: GPN Training**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **General Practice Nurse Training & Professional Development** | **Frequency** | **Face to Face / Virtual training** | **Available Online learning provider**[**Relias**](https://www.relias.co.uk/)[**E-Learning for Health**](https://www.e-lfh.org.uk/programmes/)[**Bluestream Academy**](https://www.bluestreamacademy.com/)[**Skills for Health**](http://www.skillsplatform.org/)[**Green Book Immunisations**](https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book)[**Public Health & Immunisation**](https://www.rcn.org.uk/clinical-topics/public-health/immunisation) | **Nurse Practitioner** | **Practice Nurse** | **Nursing Associate** |
| **Immunisation Training** - Initial course | Once | √ |  | √ | √ | √ |
| * Update training
 | Annual | √ | Available online see above | √ | √ | √ |
| **Clinical Excellence in Ear Care** – Initial course | Once | √ |  | √ | √ | √ |
| * Update training
 | 3 years |  |  | √ | √ | √ |
| **Cytology** - Initial course | Once | √ |  | √ | √ | √ |
| * Update training
 | 3 years |  | Available online see above | √ | √ | √ |
| **Venepuncture -** Initial course | Once | √ |  | √ | √ | √ |
| * Update training
 | 3 years | √ |  | √ | √ | √ |
| **Basic Wound Care** | Once | √ | Available online see above | √ | √ | √ |
| **Vitamin B12 -** Awareness | Once | √ |  | √ | √ | √ |
| * Administration
 | Once | √ |  | √ | √ | √ |
| **Control of Substances Hazardous to Health** | Risk assess |  | Available online see above | √ | √ | √ |
| **Medicines Management** | CPD assess | √ | Available online see above | √ | √ | √ |
| **Medical Devices** | Device driven | √ |  | √ | √ | √ |
| **Sexual Health/Family Planning** | CPD assess | √ |  | √ | √ | √ |
| **Long Term Conditions courses / modules:** Asthma, COPD, Diabetes, Cardiovascular disease, Spirometry, Palliative Care, Atrial Fibrillation & Stroke Prevention |
| **Advanced Clinical Practice** | once | √ |  | √ | √ |  |
| **Clinical Supervision** | once | √ |  | √ | √ |  |
| **Evidence Based Healthcare** | once | √ |  | √ | √ | √ |
| **Clinical Team Leadership** | once | √ |  | √ |  |  |
| **Leadership** | once | √ |  | √ | √ |  |
| **Virtual Working** | once |  |  | √ | √ | √ |
| **Customer Service Essentials** | once | √ |  |  | √ | √ |
| Table 6 |

1. **Appraisal and Succession Planning**

A robust appraisal system provides the tools to allow practices to gather the relevant information required to develop role specific learning and development plans for all staff groups. This information can then be used to establish what training courses to commission / provide. The process can also assist practices with NMC Nurse Revalidation and succession planning. Revalidation for nurses, midwives and nurse associates is straightforward and will help to demonstrate safe and effective practise. It encourages reflection of the role within [The Code](https://www.nmc.org.uk/standards/code/) and demonstrates that standards set out within it are being maintained. The annual appraisal should also include practice supervisor / assessor role and responsibilities as an opportunity to measure against the NMC *Standards for education and training.*

Constructive meetings provide the time to discuss achievements, challenges and expectations and the opportunity to raise any issues outside of the employees’ control that might impact on performance. Annual appraisal is crucial to determine individuals’ attainment and maintenance of the required knowledge, skills and competence, while planning and developing the requirements for both the future and existing 'out of hospital' workforce. A variety of documents and platforms exist to support the appraisal process.

Clarity is widely used by GPs for their appraisals and can be found on the [CMTHUB](https://www.cmthub.co.uk/gp-other/) website, along with appraisal documentation which can be used by all members of the primary care workforce. Each of the multidisciplinary specialities can be located within the Education and Training section and a link to appraisal documentation can be downloaded for each role.

Succession planning is a risk management strategy and is crucial for the primary care setting due to the high number of GPs and GPNs approaching retirement age. These normal problems have been compounded by the current recruitment crisis in general practice coupled with the Covid-19 pandemic. Succession planning will help to minimise risk during transition periods and support the sustainability of the PCN. The primary care workforce is both a key enabler and a driver of change in health, and must be integral to all future planning and investment decisions if the opportunities to improve and sustain care are to be realised. The best chance of success is to base long-term workforce strategy primarily on anticipated needs of future patients. Primary care needs a degree of specialists, but must take care to ensure a future workforce that continues to maintain a degree of generalist practitioners and adaptability. The future workforce needs able to respond to, and adopt the latest research and innovation that could benefit patients as well as promote rewarding careers.

1. **Primary Care Services Multi-disciplinary Roles**

In an integrated care system, NHS organisations in partnership with local councils and others, take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve. A multidisciplinary approach for the sustainability of primary care throughout Cheshire is essential. In collaboration with the Training Hubs across Cheshire and Merseyside, partnerships are evolving to form integrated care systems, help to address and respond to workforce needs, promote careers and engagement, consider individual education and development and identify workforce requirements for service delivery. Many new and additional roles have been developed and competency support packs / frameworks can be found on the Cheshire & Merseyside website via these links depending on the job type:

**Career opportunities and roles within Primary Care**

There is a useful visual for the all the possible clinical career pathways in primary care available via this link on the C&MTH website. This provides concise information at a glance from pre-employment through to advanced roles. Apprenticeships are available in primary care in both clinical and non-clinical roles and there is further information about different schemes on the website.

Non-clinical roles such as a Prescriptions/Medicines Management Clerk, Notes Summariser and Medical Secretary are all part of the wider administrative team that work alongside the reception and management staff. Whilst the clinical roles now include paramedics, nursing associates, physician associates, physiotherapists, pharmacists and advanced clinical practitioners along with nurses, health care assistants and GPs. Further detail on these roles are available on the "[Career ladder](https://www.cmthub.co.uk/employers/)".

HEE have recently launched

* **First Contact Practitioners and Advanced Practitioners in Primary Care: (Paramedics) A Roadmap to Practice**(link in resource list)
* **First Contact Practitioners and Advanced Practitioners in Primary Care: (MSK) A Roadmap to Practice**(link in resource list).

These are supportive documents that provide a clear educational pathway from undergraduate to advanced practice for clinicians wishing to pursue a career in primary care.  They outline the skills and attributes needed to help paramedics and MSK practitioners to become FCPs or advanced practitioners (APs). It provides a clear educational pathway for paramedics and MSK Practitioners who wish to work in primary care, as well as setting out the supervision and governance required and giving training guidance for supervisors.

**Resources**

HEE (2015) District Nursing & General Practice Nursing Services Education & Career Framework <https://www.hee.nhs.uk/sites/default/files/documents/Interactive%20version%20of%20the%20framework_1.pdf>

HEE (2021) **First Contact Practitioners and Advanced Practitioners in Primary Care: (Paramedics) A Roadmap to Practice**

<https://www.hee.nhs.uk/our-work/primary-care/first-contact-practitioners-advanced-practitioners-paramedics>

[Musculoskeletal First Contact Practitioner Guide Services - Implementation Guide (.pdf)**1.18 MB**](https://www.hee.nhs.uk/sites/default/files/documents/FCP%20How%20to%20Guide%20v21%20040919%20-%203_1.pdf)

Kings Fund (2015) Placed based systems of care – A way forward for the NHS in England

Learning and Development Governance Framework (2015) Commissioned by Vernova on behalf of East Cheshire GP Practices

NHSE (2017) General Practice – Developing confidence, capability and capacity: A ten point action plan for General Practice Nursing

NHS (2019) The NHS Long Term Plan <https://www.longtermplan.nhs.uk/wp-content/uploads/2019/01/nhs-long-term-plan.pdf>

Public Health England: National Minimum Standards and Core Curriculum for Immunisation Training for Registered Healthcare Practitioners Revised February 2018

Public Health England: National Minimum Standards and Core Curriculum for Immunisation Training of Healthcare Support Workers Revised September 2015

Resuscitation Council UK Guidelines <https://www.resus.org.uk/quality-standards/primary-care-quality-standards-for-cpr/#training>

Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff Fourth edition: January 2019 Intercollegiate Document

Adult Safeguarding: Roles and Competencies for Health Care Staff First edition: August 2018

The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates <https://www.nmc.org.uk/standards/code/>

HEE (2016) Physician Associates in primary care <https://www.hee.nhs.uk/our-work/primary-care/physician-associates-primary-care>