

Practice nurse appraisal

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Background

- Nurses conduct 35% of consultations
- ‘Contract driven’
- Affecting nurse-patient relationship and morale
- Appraisal increases internal motivation
- QOF rewards appraisal with PDP

Aims and objectives

- To replicate the Scottish GP appraisal scheme for practice nurses by
 - Adapting paperwork
 - Appointing trained GP appraisers
 - Using the same processes
 - Evaluating descriptive and reflective elements

Method

- NHS Lanarkshire with 102 practices
- Nurses in practices with GP principal an appraiser
- Scottish GP appraisal paperwork adapted by nurses
- GP appraisers briefed on formative nurse appraisal
- 6/12 to prepare for and undergo appraisal
- Feedback questionnaire
- Nurses and GPs validated conclusions

Results: paperwork

- Personal details, details of interview
- Job you do: roles and responsibilities
- Reflection on strengths and needs
- Review of past PDP: needs met and unmet
- Review of other learning: unplanned
- Current PDP: planned needs-based learning
- Any other issues: time, workload, skill mix
- Summary: record of agreed actions

Results: participants

- 8 GPs and 11 nurses
- 3 FTE, 3 x 0.75 FTE, 5 x 0.5 FTE
- Mean practice size 3 FTE GPs (1-6.3)
- Mean QOF 990 (971-1000)
- Average SIMD quintile 3.23 (range 2.26-3.84) where 1 least and 5 most deprived

Results: interviews

Nurses

- 'Useful to me in my professional role'
- 'Helped me to identify ways of addressing needs'
- 'Documentation was helpful in planning future objectives and development'
- 'Incorporated the practice nurse's views'
- 'Nurse-centred'
- Approach non-judgemental and developmental'
- 'Was enhanced by there being a skilled appraiser'
- 6months 'sufficient notice'

Comments

- Revision of paperwork
- Need to consider trained nurse peers
- Concordance: collusion? inhibition?
conflict of interest?
- Confidentiality and ownership
- Support for continuing this model

Discussion

- Professional nurse input and supervision with professional peers
- Potential conflict with GP employers
- Reconciling practice development with personal learning plans
- Budgets, performance, human resources
- Variations in practice size and capacity
- Role of the practice manager

Conclusion

- Adds to existing evidence
- Major plank of Scottish practice nurse toolkit: www.nesgpntoolkit.scot.nhs.uk
- Nursing and Midwifery Council developments
- Basis for further R&D in NHS Lanarkshire