

TRAINING GUIDE FOR GENERAL PRACTICE NURSING ASSOCIATES



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PURPOSE

This document suggests a structured approach for General Practice Nursing Associates (GPNAs) to expand their practice to meet workplace needs. It supports GPNAs to complete necessary training and supervision to undertake new duties safely. The training is not linear and areas can be selected to suit service demand and need. By completing recommended training and competencies for each area GPNAs should be prepared to undertake these activities when they are appropriately delegated. Without clear guidelines, there is a high risk of variation across the region raising concerns about patient safety. This document aims to provide support to individuals, organisations and employers to enable consistency across the General Practice arena.

This guide was developed through collaboration between three Primary Care Workforce & Training Hubs. Recommendations were informed by national guidance, existing competency frameworks, current evidence, and expert review by nurses, educators, practice managers and clinical leaders.

The training guide supports the growing number of GPNAs by providing guidance on tasks, training, and supervision. It is intended to form clear and practical guidance for practices and GPNAs, stating appropriate levels of training based on existing recommendations. This list is not comprehensive, and clinical judgment should be used where recommendations are not available. Ultimately, our goal is to ensure GPNAs are competent and confident, fostering trust among employers and training providers. This guidance supports equitable access to education and should be interpreted alongside local equality, diversity and inclusion policies.

The Pan-London Competencies Framework for General Practice Nursing & General Practice Nursing Associates produced by Northeast London Training Hub (2024) forms the basis of many of our recommendations and provides an excellent resource for primary care nursing staff as well as managers of nursing staff. The key difference between this training guide and the Pan-London Competencies framework is the specific focus in this guide has on GPNAs and their specific training needs.

This document does not list standard mandatory training as this is expected of all clinical staff in line with requirements from the Care Quality Commission (CQC, 2024).

Organisations are welcome to use this guide locally. Where adaptations are proposed, the original authors request notification so that learning can be shared and improvements considered for future versions. Where this document has been adapted locally, organisations should state:

"Adapted from the South Yorkshire Primary Care Workforce & Training Hub, West Yorkshire Primary Care Workforce & Training Hub & Humber and North Yorkshire Primary Care Workforce & Training Hub (2025). *Training Guide for General Practice Nursing Associates. Version 1.0."

SUPERVISION AND SAFETY

Supervision is crucial for excellent service delivery. Health Education England (2022) recommend that GPNAs learning new skills be supervised by a General Practice Registered Nurse (RN) to deliver care in line with an agreed plan/protocol. It is essential for GPNAs to know whom to escalate concerns to and cases beyond their current knowledge. All tasks should be delegated by an appropriate registered practitioner.

The [Pan London Competencies Framework](#) by Northeast London Training Hub (2024) competencies require sign off by a designated supervisor in practice, expected to be a RN and we recommend use of these carefully developed competency checks throughout this guide. Additionally, this framework also includes a personal self-assessment, reflective diary and development plan which GPNAs may wish to make use of within their developed resources. In addition to support ongoing development and ability to deal with complexity of situations the CQC (2019) recommend clinical supervision is accessible to Nursing Associates.

ROLE AND TRAINING

The GPNA role bridges the gap between Registered Nurse (RN) and Healthcare Assistant (HCA), following the identification of this need in Lord Willis's (2015) Shape of Caring. Nursing Associate training is a 2-year foundation degree leading to a nursing qualification with a PIN number. The work of NAs is guided by standard operating procedures, protocols, or systems of work, but the NA will make judgements, plan activities, contribute to service development, and demonstrate self-development (Health Education England, 2022).

SCOPE AND PRACTICE (NMC, 2019)

Nursing associate	Registered nurse
6 platforms	7 platforms
Be an accountable professional	Be an accountable professional
Promoting health and preventing ill health	Promoting health and preventing ill health
Provide and monitor care	Provide and evaluate care
Working in teams	Leading and managing nursing care and working in teams
Improving safety and quality of care	Improving safety and quality of care
Contributing to integrated care	Coordinating care
	Assessing needs and planning care

LIMITATIONS

While this document outlines the core role and competencies expected of a Nursing Associate, it is important to recognise that competence—defined as the ability to perform tasks and responsibilities to a required standard—does not always equate to capability. Capability encompasses the ability to adapt, respond, and make sound judgements in complex, uncertain, and often messy real-world environments. Nursing Associates work in dynamic clinical settings where the context may shift rapidly, requiring more than technical skill. Therefore, this guide should be used not as a rigid checklist, but as a foundational framework to be applied with professional judgement, situational awareness, and a person-centred mindset. Safe, effective practice relies not just on what one can do, but on knowing when and how to do it in the realities of everyday care.

This document provides guidance and does not replace professional judgement, local governance arrangements, employer policies, national legislation or regulatory standards. Recommendations are accurate at the time of publication. National guidance and professional standards may change and readers should ensure they are using the latest version. Responsibility for ensuring staff are appropriately trained, supervised and competent remains with the employing organisation.

It is recognised that the GPNA continues to evolve, however at the time of writing there are some activities the GPNA **cannot** currently undertake a list of which from the Nursing and Midwifery Council (2018) follows:

- Primary nursing assessment, diagnosis, and planning of care.
- Administer medication under a patient group direction (PGD).
- Take verbal orders for medication.
- Verify death.
- Issue a fit note.

PRESCRIBING

As a dependent practitioner, and not being able to undertake assessment, it is never possible for the GPNA to make any changes to the patient prescription, from which they should neither add nor remove prescribed items. This can only be undertaken by an independent prescriber.

KEY TERMS

Term	Definition
In house training	Training in this context refers to being shown procedures relevant to the process and practice policy where this exists. Staff training a GPNA in house should supervise the GPNA undertaking the procedure and satisfy themselves that they are competent to continue independently with as needed advice and support
Local training	Where local training is undertaken staff in practice who are familiar with the practice or procedure should supervise the GPNA undertaking the procedure and satisfy themselves that they are competent to continue independently with as needed advice and support. For any new procedures or practice the GPNA should know who in practice or externally they can approach for advice and information to develop their skills.
Continued Professional Development (CPD)	CPD is any type of learning you undertake which increases your knowledge, understanding and experiences of a subject area or role delivered by an organisation with hours attached and a certificate issued to prove attendance.
Updates	Updates are additional information bringing candidates who already have core subject knowledge up to date with recent changes to practice.
Competency check	The competency checks recommended in this document were designed by the Northeast London Training Hub as comprehensive checks under supervision to ensure that GPNAs are competent to undertake activities. We strongly recommend that GPNAs starting out in any new activity first use the Northeast London Training Hub competencies to check their knowledge and ability is satisfactory.

RECOMMENDED TRAINING BY ACTIVITY

Task/Activity	Post Registration Training	Frequency/Updates
ANTICOAGULANT THERAPY Monitoring	Complete anticoagulation competency check . (Northeast London Training Hub, 2024)	Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
ASTHMA Annual Reviews, assist in Asthma diagnostic process	Initial foundation day covering Asthma and its management then work towards diploma or equivalent in Asthma. Specific training in children and young people's asthma care CYP Asthma Tier 2 via e-learningforhealthcare (e-lfh). National Centre for Smoking Cessation and Training module on smoking cessation. If involved in spirometry, training in performance to ARTP standard. Children and young people's component if working with this group. Interpretation of spirometry is part of the diagnostic process and falls outside of the GPNA role. FeNO performance and interpretation E-Learning. Complete asthma competency check. (Northeast London Training Hub, 2024)	Diploma or equivalent once only. Annual updates as CPD. (Northeast London Training Hub, 2024) Two yearly for those working with children. Once only with discretionary updates. Once only, then 3 yearly updates. Once only training. Discretionary updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
BLOOD GLUCOSE AND KETONE MEASUREMENT	In house training to use, calibrate and clean the machine(s) and follow procedure including how to report/manage result.	Once only unless working with new equipment.

Task/Activity	Post Registration Training	Frequency/Updates
CANCER SUPPORTIVE CARE Support early identification of cancers by having awareness of symptoms and knowledge of how to appropriately escalate concerns.	Complete cancer competency check. (Northeast London Training Hub, 2024)	Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
CARDIOVASCULAR DISEASE Condition monitoring, Hypertension monitoring	Initial foundation day covering CVD and its management then work towards diploma or equivalent in CVD. Hypertension management with local recognised training. Complete cardiovascular disease competency check. (Northeast London Training Hub, 2024) Complete hypertension competency check. (Northeast London Training Hub, 2024)	Once only. Discretionary updates. Once only. Discretionary updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
CERVICAL SMEARS Explain and promote uptake of smears. Undertake procedure. Escalate concerns including safeguarding.	A nationally approved smear taker training program.	One off training required to receive smear taker number authorised through CSTD. 3 yearly updates.
CHRONIC KIDNEY DISEASE (CKD) Support patient understanding of CKD, monitor condition and escalate concerns.	Complete chronic kidney disease competency check. (Northeast London Training Hub, 2024)	Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.

Task/Activity	Post Registration Training	Frequency/Updates
CONTRACEPTION Annual pill checks, administration of depo provera.	Local training 1 day minimum. Awareness of how to work under PSD (see Medicines Management). CoSRH Contraceptive Counselling CoSRH elearning. Complete contraception and sexual health competency check. (Northeast London Training Hub, 2024)	Initial training then 2 yearly update. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
COPD Annual reviews to monitor condition escalating changes noted, assist with diagnosis, signpost to supportive services. Support patient understanding of condition, medications and lifestyle interventions.	Initial foundation day covering COPD and its management then work towards diploma or equivalent in COPD. National Centre for Smoking Cessation and Training module on smoking cessation. If involved in spirometry, ARTP standard training performance as appropriate to activities undertaken. Complete COPD competency check. (Northeast London Training Hub, 2024)	Diploma or equivalent once only. Annual updates as CPD. (Northeast London Training Hub, 2024) Once only with discretionary updates. Once only, then 3 yearly updates. Initial completion of competency check signed by clinical assessor (RN).
DEMENTIA Support monitoring, safeguard appropriately and escalate concerns.	Complete dementia competency check. (Northeast London Training Hub, 2024)	Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
DIABETES Annual review, monitor HbA1C, diabetic foot checks, support patient understanding of condition, medications and lifestyle interventions.	Initial foundation day covering diabetes and its management then work towards diploma or equivalent in diabetes. Local recognised training in performing diabetic foot checks. Complete diabetes competency check. (Northeast London Training Hub, 2024)	One off training for both diploma and foot checks. Annual updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.

Task/Activity	Post Registration Training	Frequency/Updates
EAR IRRIGATION Complete irrigation where patient has already been assessed as appropriate for procedure.	Locally recognised training in ear irrigation delivered face to face. Complete Ear Irrigation competency check. (Northeast London Training Hub, 2024)	One off training. Discretionary updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
ECG OR 24 HOUR ECG	Locally recognised training in ECG or 24 hour ECG delivered face to face.	One off training.
END OF LIFE CARE SUPPORT Work in wider teams to support holistic care and monitor patients escalating changes and signposting to services.	Complete End of Life Care competency check. (Northeast London Training Hub, 2024)	Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
EPILEPSY Support patient understanding of condition, monitor condition and signpost to appropriate services.	Complete Epilepsy competency check. (Northeast London Training Hub, 2024)	Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
HEALTH INEQUALITIES Understand the wider determinants of health and the causes and impact of health inequalities. Work with social prescribers, health and wellbeing coaches and more to support patient needs.	Complete recognised e-learning such as All Our Health: Health disparities and health inequalities Locally recognised Health Inequalities Training.	One off training. Discretionary updates.

Task/Activity	Post Registration Training	Frequency/Updates
HEALTH PROMOTION AND HEALTH CHECKS Smoking cessation, physical activity, dietary advice, discuss screening programmes	Local training covering consultation content and structure. GPNA should be able to signpost to local supportive services and may work with them to deliver services in house. National Centre for Smoking Cessation and Training module on smoking cessation. Complete Targeted Population Screening competency check. (Northeast London Training Hub, 2024)	One off training for each aspect of health promotion. Discretionary updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
MENOPAUSE	E-learning on self-care and lifestyle advice for patients experiencing menopause. E-learning on advice for patients performing self-examination of breasts. Locally recognised training to support specific groups such as those with learning disability.	One off training. Discretionary updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
MEDICATION MANAGEMENT Work under PSD, understand prescription processes in primary care and limitations. Discuss and identify issues with medications nonadherence and support patients to use medicines as prescribed. Assist in storage and monitoring of medications such as vaccines. Assist in DMARD monitoring.	Complete medication management competency check (Northeast London Training Hub, 2024) Undergraduate NA training covers giving intramuscular and subcutaneous injections. Where appropriate medicine specific training has been done such as for B12 or Prostag and PSD is in place GPNAs can administer medicines via these routes.	Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.

Task/Activity	Post Registration Training	Frequency/Updates
MINOR SURGERY ASSISTANCE Assist with procedures, wound care follow up	Aseptic technique and infection control training. Wound care training (see wound care)	At induction and then yearly as part of mandatory training. One off training. Discretionary updates.
RISK ASSESSMENT/ SCREENING Alcohol, depression and anxiety, frailty, memory screening	In house training.	One off training. Discretionary updates.
TRAVEL VACCINATIONS Give vaccinations as per recommendation of assessing clinician	Vaccinations and immunisations 2-day core training. Complete travel health and vaccination competency check. (Northeast London Training Hub, 2024)	Initial training and then discretionary updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
URINALYSIS	In house training.	One off training.
VACCINATIONS AND IMMUNISATIONS Discuss the reasons for vaccination and immunisation with patients, address patient or parent/guardian concerns and administer vaccinations under PSD.	NHSE endorsed e-learning on e learning for health (Immunisations IMM) covering childhood immunisations and vaccinations. Seasonal influenza/pneumococcal core training. Complete vaccinations adult and child competency check. UK Health Security Agency (2025)	One off training. Discretionary updates. At induction and then annual updates. Initial training then annual updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.

Task/Activity	Post Registration Training	Frequency/Updates
VAGINAL SWABS	Observe procedure in practice. In house training to use speculum and take swabs. GPNA should be able to give patient instructions for collection of self-swabs.	One off training.
VENEPUNCTURE Age of patients specified by individual practices, typically 16 and up.	Locally recognised training. Infection control and prevention mandatory training. Complete venepuncture competency check. (Northeast London Training Hub, 2024)	One off training. At induction then annual updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.
WOUND CARE Work under care plans to provide wound care. Follow agreed local guidance.	Locally recognised training. Doppler for ankle brachial pressure requires additional specific training. Complete wound care competency check. (Northeast London Training Hub, 2024) For compression bandaging an introductory course in lower limb management should be undertaken, 2-5 days duration.	One off training for each. Discretionary updates. Initial completion of competency check signed by clinical assessor (RN). Discretionary Updates.

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