



Staffordshire Training Hub

Clinical Competency Evidence Booklet for Nursing Associate's working in General Practice

2025



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B. Document Details

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Current Version Number:	5.0
Current Document Approved By:	Rachel Viggars, Staffordshire Training Hub Strategic Nurse Lead
Date Approved:	18/06/2025

C. Document Revision and Approval History (every 2 years)

Version No.	Date:	Version Created By:	Version Approved By:	Comments
1.0	01/03/2025	Wendy Bailey, GPN Practice Educator	Rachel Viggars, Staffordshire Training Hub Strategic Nurse Lead	
2.0	25/3/2025	Wendy Bailey, GPN Practice Educator	Rachel Viggars, Staffordshire Training Hub Strategic Nurse Lead	Reviewed language for scope of practice in LTCs
3.0	31/03/2025	Wendy Bailey, GPN Practice Educator	Rachel Viggars, Staffordshire Training Hub Strategic Nurse Lead	Reviewed by GPN Facilitators

4.0	11/06/2025	Wendy Bailey, GPN Practice Educator	Rachel Viggars, Staffordshire Training Hub Strategic Nurse Lead	Reviewed by Gill Boast
5.0	18/06/2025	Wendy Bailey, GPN Practice Educator	Rachel Viggars, Staffordshire Training Hub Strategic Nurse Lead	Reviewed by GPN Facilitators

Criteria for the Nursing Associate Pathway

Prior to completing this document, the Nursing Associate should have successfully completed the Nursing Associate Apprenticeship Level 5. The duration of this apprenticeship is typically over 2 years, it is a vocational course that allows the apprentice to remain an employee and attend university, usually two days a week to build upon their, 'on the job' experience and learn about the theory that underpins their practice. The apprentice will study a diverse range of topics over the duration of the programme. Example below.

University of Staffordshire

The apprentice will study a diverse range of topics over the duration of the programme:

Year 1 Modules

- Mental health and physical health through the lifespan
- Professional, legal, and ethical considerations for Nursing Associates
- Care across the lifespan
- Nursing Associates in Practice 1, 2, 3

Year 2 Modules

- Altered mental health and physical health through the lifespan
- Human factors, risk, decision making and uncertainty
- Medicines, their management and application
- Nursing Associates in Practice 4, 5, 6

Assessment

The apprentice will be assessed using a range of methods during your time as an apprentice, it is not just through writing assignments. The academic element is modular. This will mean they will be required to produce some written work but in recognition of the varied learning styles of adult learners and the outcomes required of a Nursing Associate, there are a variety of assessments within the course.

NHSE Core Capability Resources

Within this clinical competency document, we are using the NHSE resources based on the core capability resources to outline the differentiation between the nursing roles.

[A foreword by National Deputy Director, Paul Vaughan: Primary Care & General Practice Nursing Career & Core Capabilities Framework | Skills for Health](#)

These six key resources have been carefully aligned with our published frameworks for general practice, primary care, and wider community nursing teams, ensuring they are relevant, practical, and directly supportive of your professional journey. The resources have been developed by expert, generalist, and specialist nursing teams across England, reflecting a collaborative effort provide quality tools that align with the defined scope of nursing practice. Further frameworks are expected to be developed over the course of 2025/26.

[View Framework](#)

View our supporting Frameworks

- [Diabetes Educational Resources](#)
- [Heart Failure Educational Resources](#)
- [Menopause Educational Resources](#)
- [Wound Care Educational Resources](#)
- [Asthma Educational Resources](#)
- [Cancer Care Educational Resources](#)

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Introduction

The beginning of a newly qualified practitioner's career can be a challenging time, and their initial experiences can shape how they develop in their career. To ensure the best possible start for newly qualified Nursing Associates or Nursing Associates new to General Practice, completion of this competency booklet along with the preceptorship programme is essential.

The challenge for General Practice is to ensure a degree of standardisation and consistency, ensuring that the Nursing Associate (NA) has the necessary underpinning theory and competence for safe practice and to fulfil their role in supporting the Registered Nurse while acknowledging the role is a Registered Professional in its own right.

- It is the employer's responsibility to ensure that they do not allow their NA to accept delegated tasks unless the NA has sufficient support, supervision, education, and training to enable them to competently undertake the aspects of care that are being delegated.
- As a Registered NA, they are also responsible for ensuring they do not work outside of their competence and registration as per the NMC (2018) Standards of Proficiency for Nursing Associates.
- For full generic guidance on the role of a NA, see the NMC NA Standards (2018) updated April 2024.
- The table below has been created following national guidelines to ensure NAs are practicing safely and competently in general practice.
- This guidance is not exhaustive and is subject to change, dependent on national updates. National guidance should be always followed and regular updates completed to maintain competence.
- In addition, Staffordshire Training Hub have written a series of position statements for some of the delegated tasks.
- NAs should have a period of supervised practice to ensure competence and demonstrate the ability to adapt to new working environments.
- This document is live and under constant review in line with patient needs, a developing hybrid workforce, patient safety, education, training, and competency assessment.

- A Registered Nursing Associate (RNA) scope of practice will develop through CPD, additional training, education, and competency assessment throughout their career in response to the needs of a service.

Staffordshire Training Hub Key Statements		The Scope of Practice Tier Levels
	Ok to proceed with local training and agreement of competence NA must work under the supervision of the GPN, ANP, ACP or GP	TIER 1
	Requires specific training and formal sign-off competency by Registered Nurse before undertaking and may only be with specific patient groups Whilst performing the competency the Nursing Associate will need support by the Registered Nurse or General Practitioner in Practice as they are only able to review patients not complete assessments NA must work under the supervision of the GPN, ANP, ACP or GP	TIER 2
	Not currently deemed suitable	TIER 3

Registered Nursing Associates must work within their own scope of competency, but their registration does not allow them to plan care. The Scope of Practice is aligned to Tier 1, 2,3 of the Core Capability Framework [Report template](#) see Appendix 1. They can provide ongoing care, but initial assessment and care planning remains the remit of the Registered Nurse (GPN). Working outside of this scope of practice will be a breach of the NMC regulations of a nursing associate role.

NA Clinical Competencies

- NA will need clinical supervision and observation undertaking tasks. A Practice Nurse who has completed the NMC SSSA (Standards for Supervision and Assessment) requirements will need to sign off evidence of competency to confirm that the NA meets the competency requirements as per the NMC (2018) [standards-of-proficiency-for-nursing-associates-print-friendly.pdf](#).
- NA skill requirements will vary dependent on the practice they are in and the services which are offered. It is important to note that NA Registered professionals but should always work under the direction of a GPN responsible for delegating those tasks.
- Developing confidence and capability within the scope of clinical practice is key and this care activity competencies document can be used to support confidence and competence and capability of the Nursing Associate. These are linked to the Multi Professional Framework for Preceptorship (NHS, 2018) and signed off within the 12-month period in agreement with both the NA and the Assessor
- Please note that this is not an exhaustive list of competencies and may well take longer than 12 months to achieve.
- All competencies will be specific to the nursing associate and practice need.

NA Assessment Criteria

The assessment criteria used throughout this booklet is based upon Steinaker and Bell (1979). This educational model was chosen to enable the General Practice Nursing Associate to maximise their development whilst in practice area. Steinaker and Bell (1979) use a 5-category approach:

- Exposure
- Participation
- Identification
- Internalisation
- Dissemination

Guidelines to the Assessment Criteria

1. Exposure

This part of the learning process is concerned with developing a consciousness of the experience, something that we are all aware of when encountering new situations and/or subjects. The exposure can include seeing a new procedure being carried out for the first time, being shown a piece of equipment for the first time or listening to a formal talk/lecture regarding the subject/issue.

2. Participation

This is the stage at which a NA would begin to participate (usually as an assistant) in an experience. It does not imply competence. It will demonstrate the NA ability to participate in care and analyse the situation. The NA would also be expected to apply the theoretical component. At this stage, the mentor will encourage recall and assist the NA in expanding their knowledge. In practice, the mentor will provide the NA with effective feedback.

3. Identification

At this stage, the NA would be actively participating. The NA would be developing their competency and further practice of the procedure would follow. The NA would be expected to have gained the ability to analyse situations.

4. Internalisation

Internalisation occurs when experiences become an inherent part of the NA role. The experience has at this stage become part of the everyday role and competency has been achieved. The mentor at this stage will assist the NA in sustaining their competency/skills and assisting them in the consolidation of their knowledge.

5. Dissemination

NA passing knowledge onto others. Role of teacher is that of critic to ensure quality.

Internalisation is the level required for all outcomes. Dissemination is not required or expected.

Care Activities

Infection Control

Care Activity	Ability	Comments
Hand hygiene		Online yearly mandatory training through e-learning for health in line with Infection Control Guidance
PPE when performing clinical procedures		Online yearly mandatory training through e-learning for health in line with Infection Control Guidance
Aseptic technique		- Online yearly mandatory training through e-learning for health in line with Infection Control Guidance - Demonstrates the principles of aseptic technique safely
Safe management of the care environment - Sharps - Clinical waste		- Online yearly mandatory training through e-learning for health in line with Infection Control Guidance - Adherence to COSHH, Health Safety, Sharps and Needle Stick and Clinical Waste policies
Safe management of clinical equipment		- Online yearly mandatory training through e-learning for health in line with Infection Control Guidance - Equipment must be kept clean, and cleaning must be done in line with current legislation and guidance - Adherence to COSHH and Health Safety Policies - Adherence to Cold Chain Policy regarding the clinical fridges

Practice outcomes To obtain and record:	Theory <i>Date and signature</i>	Exposure <i>Date and signature</i>	Participation <i>Date and signature</i>	Identification <i>Date and signature</i>	Internalisation <i>Date and Signature</i>	Assessors' verification <i>Date and signature</i>
Hand hygiene						
PPE when performing clinical procedures						
Aseptic technique						
Safe management of the care environment • Sharps • Clinical waste						
Safe Management of the equipment within the practice • Clinical Fridges						

This section of competencies should be signed off in the first month of employment.

Risk Assessment

	Ability	Comments
MUST		NA must know /adhere to tool guidelines as well as local and national policies. Malnutrition Universal Screening Tool
Falls		Falls Risk Assessment Tool (FRAT) - Physiopedia
Pain		Scenario: Assessment of pain Management Palliative cancer care - pain CKS NICE
Qrisk 3		QRISK3
Mental Capacity to consent to treatment		Mental Capacity Act 2005
ACT score for Asthma		Asthma Control Test
CAT score for COPD		HCP Home
MRC score for COPD		MRC Dyspnoea Scale Primary Care Respiratory Society
Memory screening		gpcog_scale.pdf

NEWS 3		National Early Warning Score (NEWS)
BMI		Calculate your body mass index (BMI) for adults - NHS

Practice outcomes To obtain and record:	Theory <i>Date and signature</i>	Exposure <i>Date and signature</i>	Participation <i>Date and signature</i>	Identification <i>Date and signature</i>	Internalisation <i>Date and Signature</i>	Assessors' verification <i>Date and signature</i>
MUST						
Falls						
Pain						
Qrisk 3						

Mental Capacity to consent to treatment						
ACT score for Asthma						
CAT score for COPD						
MRC score for COPD						
Memory screening						
NEWS 2						
BMI						

This section of competencies should be expected to be signed off in 3 months of employment.

Observations

Care Activity	Ability	Comments
Blood Pressure		• NA must know /adhere to local and national guidelines • With appropriate training and supervised practice • Must know how to do both manual and electronic BP and pulse • NAs must also escalate any identified issues appropriately
Temperature		
Respirations		
Pulse		
Oxygen Saturations		
Peak Flow		
ECG		
Phlebotomy		
Blood glucose and ketone monitoring		
Urine testing		

Practice outcomes To obtain and record:	Theory <i>Date and signature</i>	Exposure <i>Date and signature</i>	Participation <i>Date and signature</i>	Identification <i>Date and signature</i>	Internalisation <i>Date and Signature</i>	Assessors' verification <i>Date and signature</i>
Blood Pressure						
Temperature						
Respirations						
Pulse						
Oxygen Saturations						
Peak flows						

ECG						
Phlebotomy						
Blood glucose and ketone monitoring						
Urine testing						

This section of competencies should be expected to be signed off in 3 months of employment.

Health Checks

Care Activity	Ability	Comments
Lifestyle Advice • Weight Management • Smoking Cessation • Alcohol Management • Exercise		• Online training through eLearning for Health • NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) • Must keep updated with latest guidelines and signpost and refer to appropriate local services available
NHS Health Checks and New Patient Health Checks (If Applicable to Practice)		• Online training through eLearning for Health • NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) • Must keep updated with latest guidelines and signpost to and refer to appropriate services available within the area

Practice outcomes To obtain and record:	Theory <i>Date and signature</i>	Exposure <i>Date and signature</i>	Participation <i>Date and signature</i>	Identification <i>Date and signature</i>	Internalisation <i>Date and Signature</i>	Assessors' verification <i>Date and signature</i>
Lifestyle Advice • Weight Management • Smoking Cessation • Alcohol Management • Exercise						
NHS Health Checks and New Patient Health Checks (If Applicable to Practice)						

This section of competencies should be expected to be signed off in 3 months of employment.

Wound Care

Dependent on Service Delivery within the Practice Area

Care Activity	Ability	Comments
Pressure Ulcers - Dressings		- NA must work under the supervision of the GPNs. GPN must create a care plan and initiate changes. - NAs must also escalate any identified issues appropriately - NAs must also complete wound care training for example Wound Care Education for the Health and Care Workforce - elearning for healthcare
Leg Ulcers - Dressings		- NA must work under the supervision of the GPNs. GPN must create a care plan and initiate changes. - NAs must also escalate any identified issues appropriately and refer onto to ambulatory wound clinic ASAP - NAs must also complete wound care training
Emollient's / Creams		NA able to apply if prescribed by GP
Compression bandages and Hosiery		- NA must work under the supervision of the GPNs. GPN must create a care plan and initiate changes. - NA must complete relevant training such as compression hosiery and assessment
Surgical Wounds - Dressings - Clip Removal - Suture Removal		- NA must work under the supervision of the GPNs. GPN must create a care plan and initiate changes. - NAs must also complete wound care training for example Wound Care Education for the Health and Care Workforce - elearning for healthcare and a period of supervision

Traumatic / Acute Wound		• NA must work under the supervision of the GPNs. GPN must create a care plan and initiate changes. • NAs must also complete wound care training and a period of supervision
Chronic Wound		• NA must work under the supervision of the GPNs. GPN must create a care plan and initiate changes. • NAs must also complete wound care training and a period of supervision
Fungating Wound		• NA must work under the supervision of the GPNs. GPN must create a care plan and initiate changes. • NAs must also complete complex wound care training and a period of supervision
Packing Wound		• NA must work under the supervision of the GPNs. GPN must create a care plan and initiate changes. • NAs must also complete complex wound care training and a period of supervision
Wound Swabs		• To take in line with local policy

Practice outcomes To obtain and record:	Theory <i>Date and signature</i>	Exposure <i>Date and signature</i>	Participation <i>Date and signature</i>	Identification <i>Date and signature</i>	Internalisation <i>Date and Signature</i>	Assessors' verification <i>Date and signature</i>
Pressure Ulcers - Dressings						
Leg Ulcers - Dressings						
Compression bandages and Hosiery						
Surgical Wounds • Dressings • Clip Removal • Suture Removal						
Traumatic / Acute Wound						
Chronic Wound						
Fungating Wound						
Packing Wound						
Wound Swabs						

This section of competencies should be expected to be signed off in 6 months of employment.

Injections

Medications

Care Activity Injections	Ability	Comments
B12		• NA must have completed appropriate training for example Administering Vitamin B12 In Primary care, and a period of supervision • Knowledge of medication, condition, rational, contraindications and side effects • Overview Vitamin B12 deficiency in over 16s: diagnosis and management Guidance NICE • Only to give after receipt of signed PSD • NA must work under the supervision of the GPN, ANP, ACP or GP
Adrenaline		• NA must have undertaken mandatory anaphylaxis's training
Prostap Testosterone		• NA must have completed appropriate in-house training and supervised practice and have knowledge of medication, condition, rational, contraindications and side effects. • Leuprorelin acetate Drugs BNF NICE • Testosterone Drugs BNF NICE • Only to give after receipt of PSD • NA must work under the supervision of the GPN, ANP, ACP or GP
Zoladex		

Any other injectable		• NA must have completed appropriate training and a period of supervision. • Knowledge of medication, condition, rational, contraindications and side effects • Only to give after receipt of signed PSD • NA must work under the supervision of the GPN, ANP, ACP or GP				
Practice outcomes To obtain and record:	Theory Date and signature	Exposure Date and signature	Participation Date and signature	Identification Date and signature	Internalisation Date and Signature	Assessors' verification Date and signature
B12						
Adrenaline						
Prostap						
Testosterone						

Any other injectable						

This section of competencies should be expected to be signed off in 6 months of employment.

Vaccinations

Medications

Care Activity	Ability	Comments
- Childhood Immunisations (excluding first immunisations) - Pre-school boosters - Teenage boosters		- NA Extended role- minimum of 12 months experience in General Practice before being permitted to do extended role training - Supported by a Registered Nurse in the building who is trained in immunisations. - NA must have completed the training as per national guidance and complete RCN (2022) Immunisation Knowledge Vaccination and Skills Assessment Tool Immunizations - childhood Health topics A to Z CKS NICE - Knowledge of medication, condition, rational, contraindications and side effects - Only to give after receipt of signed PSD - NA must work under the supervision of the GPN, ANP, ACP or GP
- Flu - RSV - Pneumococcal - Pertussis (whooping cough) - Covid - Shingles		- Minimum of 2 days formal foundation immunisation training followed by supervised practice and annual reviews - Knowledge of medication, condition, rational, contraindications and side effects - Only to give after receipt of signed PSD or the National Protocol - NA must work under the supervision of the GPN, ANP, ACP or GP
Travel Health		NA must have completed Travel health training course and RCN (2023) Travel Health Nursing Career and Competence Development

		• Can work under the guidance of a Registered Nurse to give vaccinations and advice but not the initial assessment of travel needs • Travel vaccinations and precautions Treatment summaries BNF NICE • Knowledge of medication, condition, rational, contraindications and side effects • Only to give after receipt of signed PSD • NA must work under the supervision of the GPN, ANP, ACP or GP

Practice outcomes To obtain and record:	Theory <i>Date and signature</i>	Exposure <i>Date and signature</i>	Participation <i>Date and signature</i>	Identification <i>Date and signature</i>	Internalisation <i>Date and Signature</i>	Assessors' verification <i>Date and signature</i>
• Childhood Immunisations (excluding first immunisations) • Pre-school boosters • Teenage booster						

• Flu • Covid • RSV • Pneumococcal • Shingles • Pertussis (whooping cough)						
Travel Health						

This section of competencies should be expected to be signed off:

- For Student Nursing Associates, in year 2 of training if not signed as competent from a previous role (e.g. HCSW)
- For registered NAs; 3-6 months of employment For Flu, Covid, RSV, Pneumococcal, Shingles and Pertussis (whooping cough)
- 1-2 years for Childhood Vaccinations and Travel Health as this is Extended Role

Oral Drugs

Medications

Care Activity Injections	Ability	Comments
Oral Drugs		- Must have completed appropriate training and period of supervised practice and have knowledge of medication, condition, rational, contraindications and side effects. - Only to give after receipt of signed PSD - NA must work under the supervision of the GPN, ANP, ACP or GP

Practice outcomes To obtain and record:	Theory Date and signature	Exposure Date and signature	Participation Date and signature	Identification Date and signature	Internalisation Date and Signature	Assessors' verification Date and signature
Oral Drugs						

This section of competencies should be expected to be signed off 3-6 months of employment or if Student Nursing Associate, then after completion of the Medicines Management module in year 2.

Contraception

Care Activity	Ability	Comments
Support Contraception Review	Yellow	- NA can give lifestyle advice prior to further training - NA must have completed formal contraception training to do full review, have knowledge of pills, missed pills, risks, seven-day rule, family history. They cannot change / plan to alternative methods of contraception CEU Guidance test SRH Essentials for Primary Care FSRH Contraception - assessment Health topics A to Z CKS NICE - NA must work under the supervision of the GPN, ANP, ACP or GP
Initiation of Contraception	Red	
Chaperone for LARC fittings	Green	- NA must have completed appropriate training - Adhere to Infection Control Measures and Aseptic Technique
Contraception Injections for example: - Depo-Povera Sayana Press	Yellow	- NA must have completed appropriate sexual health training to ensure patients are reviewed properly prior to administering and be able to advise patients about this form of contraception, side effects etc. CEU Guidance test SRH Essentials for Primary Care FSRH - Knowledge of medication, condition, rational, contraindications and side effects Scenario: Progestogen-only injectables Management Contraception - progestogen-only methods CKS NICE

		- Only to give after receipt of signed PSD - NA must work under the supervision of the GPN, ANP, ACP or GP

Practice outcomes To obtain and record:	Theory <i>Date and signature</i>	Exposure <i>Date and signature</i>	Participation <i>Date and signature</i>	Identification <i>Date and signature</i>	Internalisation <i>Date and Signature</i>	Assessors' verification <i>Date and signature</i>
Support Contraception Review						
Chaperone for LARC fittings						
Contraception Injections - Depo-Provera - Sanaya Press						

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This section of competencies should be expected to be signed off in 1 year of employment.

Cervical Cytology

Care Activity	Ability	Comments
Cervical Cytology		• NA Extended role - minimum of 12 months' experience in General Practice as an NA before being permitted to do extended role training • Completed and passed a University Cervical Cytology course and been given a PIN number to practice • Supported by a Registered Nurse in the building who is trained in Cervical Cytology • Cervical screening Health topics A to Z CKS NICE • NA must work under the supervision of the GPN, ANP, ACP or GP
Vaginal Swabs		• NA must have undergone appropriate training and a period of supervision • NA must work under the supervision of the GPN, ANP, ACP or GP

Practice outcomes To obtain and record:	Theory <i>Date and signature</i>	Exposure <i>Date and signature</i>	Participation <i>Date and signature</i>	Identification <i>Date and signature</i>	Internalisation <i>Date and Signature</i>	Assessors' verification <i>Date and signature</i>
Cervical Cytology						
Vaginal Swabs						

This section of competencies should be expected to be signed off in 1-2 years of employment as this is an extended role.

Long Term Conditions

Care Activity		Ability	Comments
Asthma	Lifestyle Advice		- NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - NA must keep updated with the latest guidelines and signpost and refer to appropriate local services available (UK Asthma and COPD, Right Breathe website and NICE Guidelines)
	Observations		- NA must follow local and national guidelines. - Complete ACT score Asthma Control Test
	Support the Annual Review		- NA Extended role with appropriate training either eLearning for Health, or from formal provider STH or University Module - Recommended at least 1 years' experience as a NA in general practice - To be completed under the supervision of another Registered healthcare professional - Following suitable training to check inhaler technique. - Must keep updated with the latest guidelines and signpost and refer to appropriate local services available (UK Asthma and COPD, Right Breathe website and NICE Guidelines) - NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - NA must work under the supervision of the GPN, ANP, ACP or GP
	Full Annual Review		- Clinical Management Plans to be completed by GPN - Annual review to be completed and signed off by GPN

COPD	Lifestyle Advice		- NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - NA must keep updated with latest guidelines and signpost and refer to appropriate local services available (UK Asthma and COPD, Right Breathe Web site and Pulmonary Rehab and NICE Guidelines)
	Observations		- NA must follow local and national guidelines - Complete CAT score HCP Home and MRC Breathlessness score MRC Dyspnoea Scale Primary Care Respiratory Society
	Support the Annual Review		- NA Extended role with appropriate training either eLearning for Health, or from formal provider STH or University Module - Recommended at least 1 years' experience as a NA in general practice - To be completed under the supervision of another Registered healthcare professional - Following suitable training to check inhaler technique. - Must keep updated with latest guidelines and signpost and refer to appropriate local services available (UK Asthma and COPD and Right Breathe website, Pulmonary Rehab, NICE Guidelines) - NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - NA must work under the supervision of the GPN, ANP, ACP or GP
	Full Annual Review		- Clinical Management Plans to be completed by GPN - Annual Review to be completed and signed off by GPN

Spirometry	Performing		• NA Extended Role available to Practice • To be trained in ARTP standard - Spirometry Guidance • NA must work under the supervision of the GPN, ANP, ACP or GP
	Interpretation		
FENO	Performing		• To be trained and assessed as competent in accordance with relevant local guidance. FeNO test Asthma + Lung UK • Availability of the FENO machine to Practice • NA must work under the supervision of the GPN, ANP, ACP or GP
	Interpretation		
Pre-Diabetes and Diabetes	Lifestyle Advice		• NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) • NA must keep updated with the latest guidelines and signpost and refer to appropriate local services available: - • NHS England » NHS Diabetes Prevention Programme (NHS DPP) • DESMOND and Diabetes UK Website, NICE Guidelines
	Observations		• NA must follow local and NICE national guidelines. • Overview Type 2 diabetes in adults: management Guidance NICE
	Support the Annual Review		• NA Extended role with appropriate training either eLearning for Health, or from formal provider STH or University Module

			- For example:-Diabetes courses for healthcare professionals Diabetes UK - Recommended at least 1 years' experience as a NA in general practice - To be completed under the supervision of another Registered healthcare professional - NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - Must keep updated with latest guidelines and signpost and refer to appropriate local services available (DESMOND. Diabetic UK Website, NICE Guideline's) - NA must work under the supervision of the GPN, ANP, ACP or GP
	Diabetic Foot Checks		- NA to be trained and assessed as competent using eLearning for health or GP365 platform or Diabetes Foot Screening – Foot Risk Awareness and Management Education (FRAME) How to perform a diabetes foot check RCN Magazine Royal College of Nursing - NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - Must keep updated with the latest guidelines and signpost and refer to appropriate local services available (Podiatry) - NA must work under the supervision of the GPN, ANP, ACP or GP
Hypertension and CHD	Lifestyle Advice		- NA to follow Hypertension in adults: diagnosis and treatment NICE Guidelines NG136 Visual summary - NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP)

			• Must keep updated with latest guidelines and signpost and refer to appropriate local services available (British Heart Foundation Website and NICE Guidelines)
	Observations		• Must follow local and NICE national guidelines. • Overview Cardiovascular disease: risk assessment and reduction, including lipid modification Guidance NICE • Overview Hypertension in adults: diagnosis and management Guidance NICE • NA must complete QRISK3 and advise around cholesterol pathway and British Heart Foundation Website
	Support the Annual Review		• NA Extended role with appropriate training either eLearning for Health, or from formal provider STH or University Module • For example: - • Hypertension: diagnosis, assessment, and management RCNi Learning • Coronary Heart Disease for Primary Care Course (online) – Rotherham Respiratory LTD • Recommended at least 1 year's experience as a NA in general practice • To be completed under the supervision of another Registered healthcare professional • NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) • Must keep updated with latest guidelines and signpost and refer to appropriate local services available (DESMOND) • NA must work under the supervision of the GPN, ANP, ACP or GP

	Full Annual Review		To be completed and signed off by GPN
Atrial Fibrillation	Lifestyle Advice		- NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - Must keep updated with the latest guidelines and signpost and refer to appropriate local services available (NICE Guidelines)
	Observations		- Must follow local and NICE national guidelines. Overview Atrial fibrillation: diagnosis and management Guidance NICE
	Support the Annual Review		- NA Extended role with appropriate training either eLearning for Health, or from formal provider STH or University Module - For example:- Atrial Fibrillation - NHS Health Check Training Hub - Recommended at least 1 year's experience as a NA in general practice - To be completed under the supervision of another Registered healthcare professional - NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - Must keep updated with latest guidelines and signpost and refer to appropriate local services available - NA must work under the supervision of the GPN, ANP, ACP or GP
	Full Annual Review		To be completed and signed off by GPN

CKD	Lifestyle		- NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - Must keep updated with the latest guidelines and signpost and refer to appropriate local services available (NICE Guidelines)
	Observations		- Must follow local and NICE national guidelines Overview Chronic kidney disease: assessment and management Guidance NICE
	Support the Annual Review		- NA Extended role with appropriate training either eLearning for Health, or from formal provider STH or University Module - Recommended at least 1 year's experience as a NA in general practice - For example - :Chronic Kidney Disease: the essentials - To be completed under the supervision of another Registered healthcare professional - NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - Must keep updated with latest guidelines and signpost and refer to appropriate local services available - NA must work under the supervision of the GPN, ANP, ACP or GP
	Full Annual Review		To be completed and signed off by GPN
Learning Disabilities	Lifestyle Advice		NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP)

			Must keep updated with latest guidelines and signpost and refer to appropriate local services available
	Observations		- Must follow local and national guidelines Recommendations Learning disabilities and behaviour that challenges: service design and delivery Guidance NICE
	Support the Annual Review		- NA Extended role with appropriate training for example: - eLearning for Health and face to face mandatory Oliver McGowan training - Recommended at least 1 year's experience as a NA in general practice - To be completed under the supervision of another Registered healthcare professional - NAs must also escalate any identified issues appropriately by signposting to appropriate Health Professional (General Practitioner/ANP) - Must keep updated with latest guidelines and signpost and refer to appropriate local services available - NA must work under the supervision of the GPN, ANP, ACP or GP
	Full Annual Review		To be completed and signed off by GPN

This list of Long-Term Conditions competency is not exhaustive and can be added to by individual General Practices themselves.

Practice outcomes To obtain and record:	Theory <i>Date and signature</i>	Exposure <i>Date and signature</i>	Participation <i>Date and signature</i>	Identification <i>Date and signature</i>	Internalisation <i>Date and Signature</i>	Assessors' verification <i>Date and signature</i>
Asthma						
COPD						
Spirometry						
FENO						
Diabetes						
Hypertension and CVD						
Atrial Fibrillation						
Chronic Kidney Disease						
Learning Disabilities						

This section of competencies should be expected to be signed off in 1-2 year of employment.

Evaluation

Care Activities:

NA feels confident and competent to undertake this as outlined:	Yes ☐ No ☐
NA agrees to refer to professional practitioner if condition of client changes or they do not feel competent:	Yes ☐ No ☐
Do you feel competent to perform these delegated tasks?	Yes ☐ No ☐
If NA not competent what action taken?	

Main Assessors Name and Signature:		Date:	
NA's Name and Signature:		Date:	

Appendices

To Support Practice NA and Assessor in Clinical Practice

Appendix 1: Learning Contract

Learning Contract

It is essential that you complete this learning contract to document the learning activities that you will undertake. Please photocopy this sheet as often as necessary.

Agreed Activities <i>How will they be achieved?</i>	Timeframes <i>When will it be achieved?</i>	Agreed Evidence <i>How will learning be demonstrated?</i>



Signature of Assessor:		Date:	
Signature of Nursing Associate:		Date:	

Appendix 2: Initial Meeting Record

Initial Meeting Record

Name of Nursing Associate:	
Name of Assessor:	
Work area:	
Date of meeting:	
Icebreaker questions Tell me a little about yourself. What do you enjoy doing? What are you looking forward to about your new role? What do you think is going to be challenging?	

Expectations

What are your expectations of your new role? What development do you expect? What level of support do you expect from your assessor?

Induction Checklists Has the NA had the opportunity to complete the following?	Organisation induction	Yes ☐ No ☐
	Clinical induction	Yes ☐ No ☐
	Local induction	Yes ☐ No ☐
	Individual Learning Plan*	Yes ☐ No ☐

Comments/Notes:

Actions:

Date of next meeting:

NA signature:

Date:

Assessor signature:

Date:

Appendix 3: Individual Learning Plan Template

Individual Learning Plan (ILP)

The individual learning plan records development needs and agreed objectives. Objectives should be SMART (specific, measurable, achievable, realistic/relevant and timebound).

Name of Nursing Associate:	
Name of Assessor:	

There should be no more than three objectives for each ILP, for it to be realistic.

Date	Learning Need	SMART Objective	Support Needed

Appendix 4: Monthly Meeting Record Template

Monthly Meeting Record

Name of Nursing Associate:	
Name of Assessor:	
Work area:	
Date of meeting:	

Reflection and Discussion

What has gone well? What challenges have you met? How have you overcome them? Consider use of reflection templates* and the sharing of observations (*it is recommended that five reflections are completed during the competency period*). Review written reflections.

Review of Development

What development/study days have you had? How have you found these? What has gone well? What have you found difficult? Are there areas in which you need more development or experience? Progression points?

Review of Individual Learning Plan

Review ILP set during previous meeting. Assess achievement against objectives and, where appropriate, set further objectives.

Comments/Notes:

Actions Agreed:

Date of next meeting:			
NA signature:		Date:	
Assessor signature:		Date:	

Appendix 5: Final Sign off Meeting Record Template

Final Sign off Meeting Record

Name of Nursing Associate:	
Name of Assessor:	
Work area:	
Date of meeting:	

Reflection and Discussion

What has gone well? What challenges have you met? How have you overcome them?

Review of Development

What development/study days have you had? How have you found these? What has gone well? What have you found difficult? Are there areas in which you need more development or experience? Points of progression?

Review of Individual Learning Plan

Review ILP set during previous meeting. Assess achievement against objectives and, where appropriate, set further objectives.

Comments/Notes:

Actions Agreed:

Date of next meeting:			
NA signature:		Date:	
Assessor signature:		Date:	

Appendix 6: NMC Reflective Accounts Form

REFLECTIVE ACCOUNTS FORM

You must use this form to record five written reflective accounts on your CPD and/or practice-related feedback and/or an event or experience in your practice and how this relates to the Code. Please fill in a page for each of your reflective accounts, making sure you do not include any information that might identify a specific patient, service user or colleague. Please refer to our guidance on preserving anonymity in Guidance sheet 1 in *How to revalidate with the NMC*.

Reflective account:
What was the nature of the CPD activity and/or practice-related feedback and/or event or experience in your practice?
What did you learn from the CPD activity and/or feedback and/or event or experience in your practice?
How did you change or improve your practice as a result?
How is this relevant to the Code? Select one or more themes: Prioritise people – Practise effectively – Preserve safety – Promote professionalism and trust

Additional Resources and Guidance

Courses and further information

- <https://www.staffordshiretraininghub.com>
- <https://portal.e-lfh.org.uk/>
- [Inspiring best practice in respiratory care | Primary Care Respiratory Society](#)
- [NHS Health Check - NHS](#)
- <https://www.rcn.org.uk/Get-Help/RCN-advice/nmc-preceptorship>
- <https://www.nmc.org.uk/standards/code>

References

- Lincolnshire Training Hub Nursing Associate General Practice Competencies
<https://www.lincolnshiretraininghub.nhs.uk/professional-development/nursing/>
(Accessed: 11 February 2025)
- NMC (2024) Standards of proficiency for Registered Nursing Associates, The Nursing and Midwifery Council.
<https://www.nmc.org.uk/standards/standards-for-nursing-associates/standards-of-proficiency-for-nursing-associates/>
(Accessed: 11 February 2025)
- NHS Health Education England (2017) Nursing Associate Curriculum Framework
https://www.hee.nhs.uk/sites/default/files/documents/Nursing%20Associate%20Curriculum%20Framework%20Feb2017_0.pdf
(Accessed: 11 February 2025)
- NHS Midlands 2024 *Preceptorship Handbook for Nursing Associates new to Primary care*. NHS England
- RCN (2022) Newly Registered Nursing Associate Guide
<https://www.rcn.org.uk/-/media/Royal-College-Of-Nursing/Documents/Membership/NRNA-guide/Newly-Registered-NAs-guide.pdf>
(Accessed: 11 February 2025)
- Skills for Health (2024) *A foreword by national deputy director, Paul Vaughan: Primary care & general practice nursing career & core capabilities framework*, Skills for Health
<https://www.skillsforhealth.org.uk/article/a-foreword-by-national-deputy-director-paul-vaughan-primary-care-general-practice-nursing-career-core-capabilities-framework/>
(Accessed: 11 February 2025)

Acknowledgment

Original document created by:	Lincolnshire Training Hub
Updated by:	Staffordshire Training Hub

It is envisaged that the NA will work through the Preceptorship Handbook for Nursing Associates new to Primary Care to support this competency booklet.



For further help or guidance please do not hesitate to contact the Staffordshire Training Hub:

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