

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [dyfodol ymarfer cyffredinol yng Nghymru](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [the future of general practice in Wales](#)

GP15 : Ymateb gan: Coleg Nyrsio Brenhinol Cymru | Response from:
Royal College of Nursing



The Royal College of Nursing Wales response to the Health and Social Care Committee inquiry into ‘The future of general practice in Wales’

Introduction

The Royal College of Nursing is the professional body nurses, midwives, health visitors and nursing students, with around 30,500 members in Wales. Two thirds of our members work outside the acute hospital environment in the community, including working in general practice and primary care. The RCN is a major contributor to nursing practice, standards of care, and public policy as it affects health and nursing. The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.

The Terms of Reference for this Inquiry focus specifically on general practice and the workforce employed by these employers. However, general practice services exist in a broader context of primary care, community and social care services.

It is the view of the RCN that planning for primary care services needs to consider services both within and out with the GMS contract. Primary Care Nurses possess the exact skills and attributes required to meet modern patient need and drive forward this transformation.

Registered Nurses and health care support workers are employed by GPs. There is a wide range of qualifications, experience and job roles undertaken by registered nurses employed by GPs. Registered Nurses can be qualified as Nurse Practitioners, independent prescribers, Nurse Specialists and Consultant Nurses.

Primary Care Nursing presents a credible solution to upscale both health prevention and long-term condition optimisation agendas, improving access, supporting the care closer to home agenda and improving quality of life for the people of Wales in doing so.

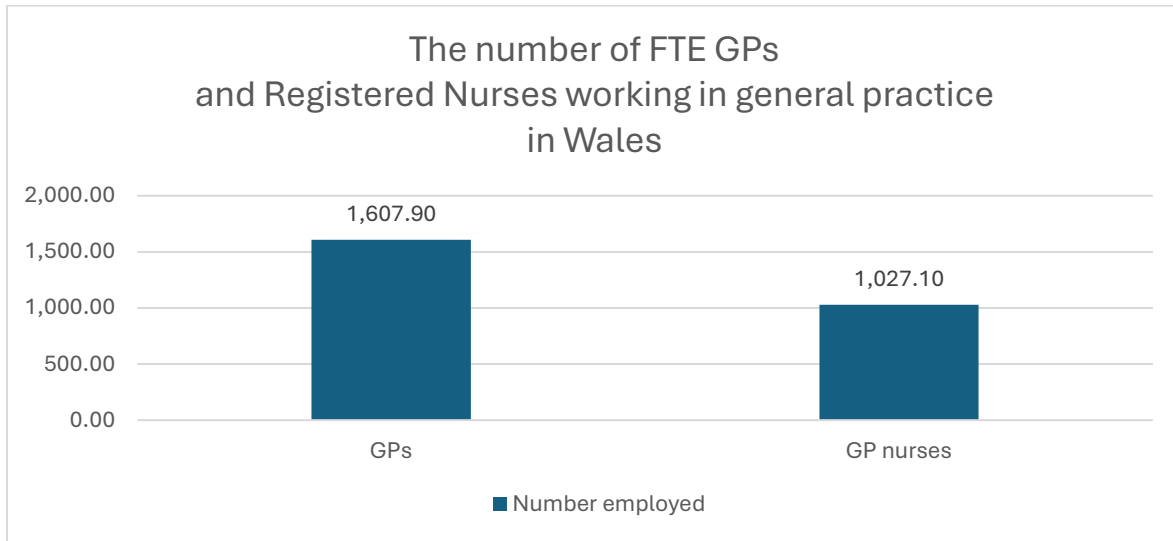
Within the GP surgery it is often the Registered Nurse that will see, advise and treat people appropriately. Registered nurses, depending on their level of qualification can undertake a huge range of assessments and interventions, immunisation and vaccination, the management of long-term conditions and cervical cytology. Registered Nurses can treat small injuries, assist with minor operations done under local anaesthetic, lead patient care in managing long-term conditions and smoking cessation, run vaccination programmes, and more.

GP Nursing workforce

There are 1,027.1 FTE registered nurses working in general practices in Wales, in comparison to 1,607.9 GPs (both figures are as of 30 September 2024).¹

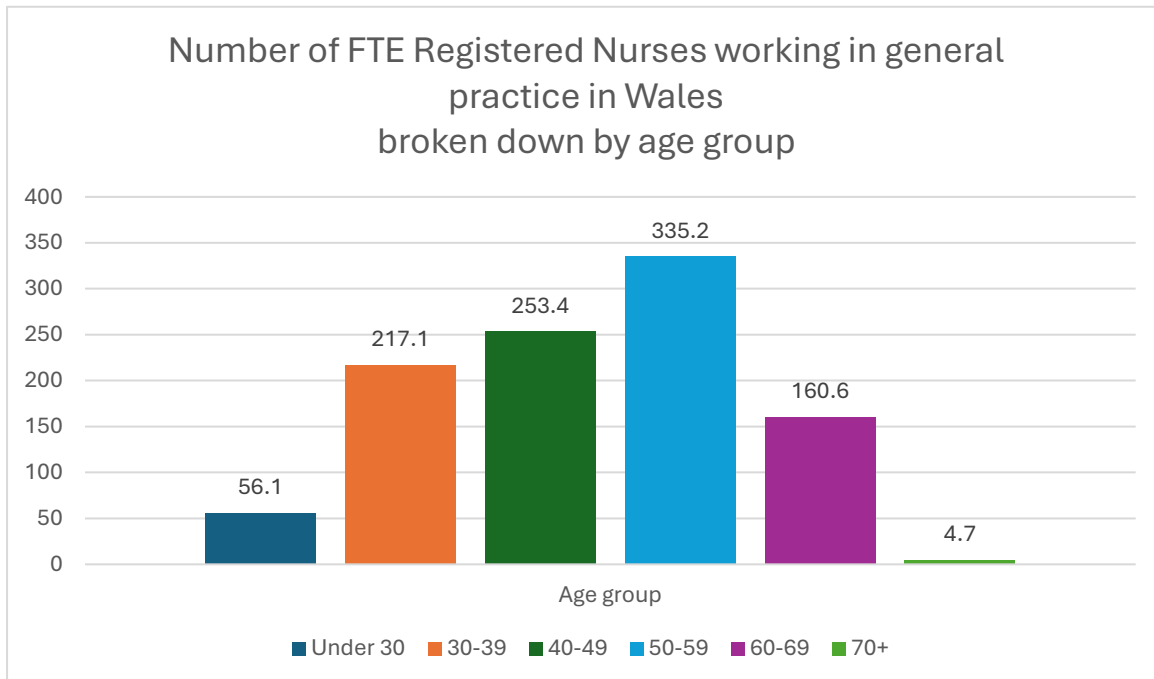
¹ StatsWales: <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/General-Medical-Services/General-practice-workforce>

Table 1 ²



The age profile of nurses working in GP settings is concerning. Almost half (48.7%) are at least 50 years old and 16.1% are aged 60 or older. Most of the remainder are between 30 and 49 years old (45.8%), with just 5.5% aged 29 or younger. This age profile is concerning because nurses approaching (or older than) 55 are more likely to be considering leaving the workforce as they near retirement age. (Figures as of September 2024).

Table 2 ³



² StatsWales: <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/General-Medical-Services/General-practice-workforce>

³ StatsWales: <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/General-Medical-Services/General-practice-workforce/widerpracticestaffheadcount-by-age-localhealthboard>

The Welsh Government should therefore ensure that nursing in GP settings is seen as an attractive career option for newly qualified nurses.

Health Education and Improvement Wales (HEIW) is responsible for commissioning nursing student programme places at universities. HEIW's Education and Training Plan (ETP) 2025-26 shows that only 21 places for the post registration General Practice Nursing Foundation Programme have been commissioned for 2025-26, even though HEIW had originally requested Welsh Government funding to commission 50 places.⁴ In order to ensure resilient primary care services in Wales that are fit for the future, more postgraduate student places must be commissioned.

Another barrier to ensuring an effective nursing education for nursing students in primary care is the lack of placements in GP surgeries. One reason for this is because GPs require payment for allowing a nursing student to have an education placement at the surgery. This is not equitable when other parts of the NHS and independent health and social care do not receive a payment for placements. The Welsh Government, through HEIW, should ensure a consistent policy position regarding placement tariffs.

Wales requires significant investment in the development of an educational pipeline of highly competent Primary Care Nurses and an onwards postgraduate career framework. It is important that all primary care registered nurses have access to HEIW's Professional Framework for Enhanced, Advanced and Consultant Clinical Practice.⁵

To achieve this, funding is needed to support not only the direct provision of education but also the associated backfill to ensure uptake of courses. Nursing student placements must be funded in parity with the other professions (Pharmacy and Medicine) and should be developed alongside these. For example, the HEIW Nursing Workforce strategy emphasises the public health role of nursing, so new opportunities in nursing education in primary care are needed to fulfil this.

The role of the Registered Nurse in general practice

Primary Care Nurses and advanced health practitioners undertook 22,000 appointments each working day in 2023 – 2024, with 88% of these being attributable to long term conditions management and a further 11% to urgent care needs.⁶ It would be normal to see nurses in primary care settings being responsible for leading up to 99% of diabetes care and 86% of respiratory care.

For example, all individuals could be offered a comprehensive appointment with a registered nurse working in general practice or other Primary Care Nurse every 10 years, which would ensure a minimum level of interaction between patients and registered nurses working in general practice. These appointments would involve a two-way conversation between patient

⁴ HEIW, Education and Training Plan (ETP) 2025-26, p. 31: <https://heiw.nhs.wales/et-2025-26/>

⁵ HEIW, Professional Framework for Enhanced, Advanced and Consultant Clinical Practice: [Professional Framework for Enhanced, Advanced and Consultant Clinical Practice - HEIW](#)

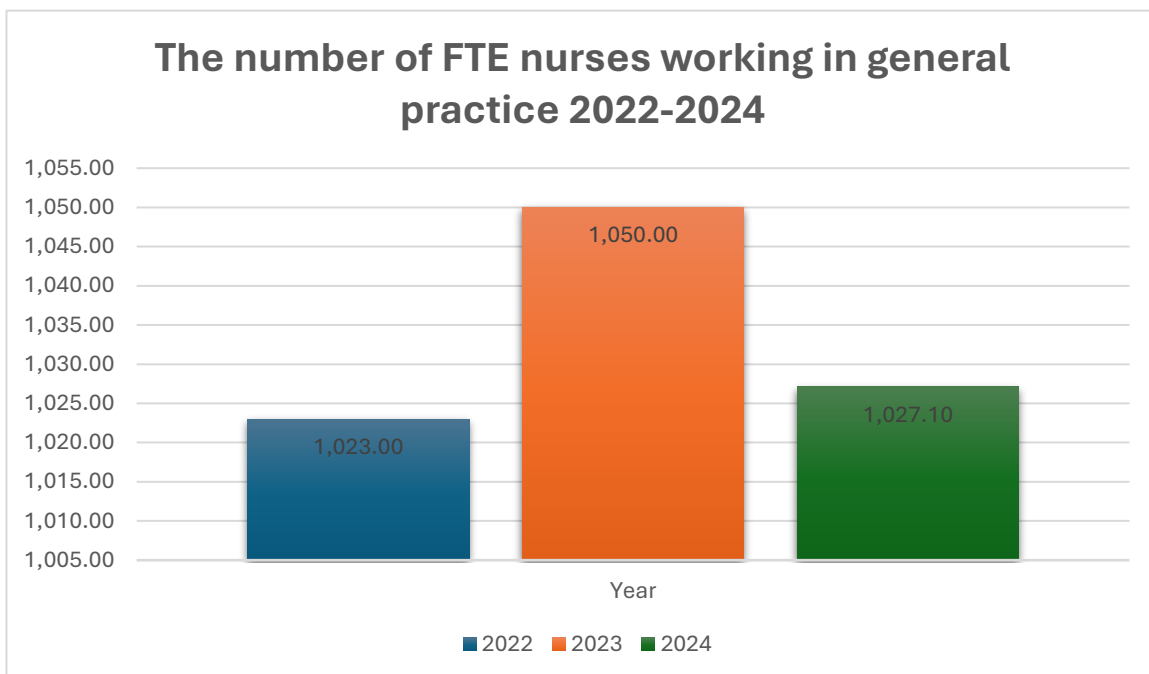
⁶ [General practice activity: April 2023 to March 2024 \[HTML\] | GOV.WALES](#)

and nurse, where the patient’s health needs would be assessed holistically, thus ensuring that sufficient attention is placed on mental health as well as physical health. This illustrates the potential of primary care nursing to improving the overall health of the population.

Learning disability nurses work in various settings, including in primary care. One of the “Desired Outcome” identified as part of the Welsh Government’s 2018 report, *Learning Disability Improving Lives Programme* was “To reduce health inequalities for people with a learning disability and reduce avoidable and premature deaths through early intervention, prevention & accessible services” (p. 19).⁷ It is very disappointing that, seven years on, this has not been achieved.

2024 saw a decline in the number of registered nurses working in general practice compared to the previous year:

Table 3⁸



Advanced Nurse Practitioner posts are needed across Wales to strengthen primary care teams and to deliver more timely services for the public. The Welsh Government should encourage, potentially through the GMS contract, GP employers to achieve this. Alternatively, there could be nurse-led services as part of the GMS contract or Advanced Nurse Practitioners that are directly employed by NHS Wales.

⁷ Welsh Government 2018, Learning Disability Improving Lives Programme: [learning-disability-improving-lives-programme-june-2018.pdf](https://www.welsh.gov.uk/learning-disability-improving-lives-programme-june-2018.pdf)

⁸ Source: StatsWales: <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/General-Medical-Services/General-practice-workforce/number-of-wider-practice-staff-employed-in-general-practices>

RCN Wales believes that services must be delivered based on the needs of the population, and this includes Welsh language provision.

To ensure that there are enough registered nurses working in primary care, it is vital that we educate the next generation of primary care nurses. HEIW – following advice from the RCN and other royal colleges as well as from primary care clusters – should therefore increase specialist primary care education and nursing student placements.

Primary care clusters

GP practices work in “clusters” to develop services across a geographical area. There are currently 64 clusters in Wales. GP practices work together through this cluster model to ensure consistency in care and support smooth communication between GPs, registered nurses working in general practice and the wider community workforce, including District Nurses.

Registered nurses, both those employed in GP practices and indeed those in community nursing services, need to be included in strategic planning undertaken by primary care clusters. To ensure that this is the case, it should be required that there is a registered nurse on every cluster board.

Clusters have a responsibility to ensure that professional development opportunities are available to those working within them, including registered nurses working in general practice and Healthcare Support Workers, not only to enable essential revalidation, but also as a way of upskilling the primary care workforce and thus reducing the demand on GPs.

Recent research evidence has shown that attendance at cluster meetings by registered nurses working in general practice is very low. Funds directed towards enabling registered nurses working in general practice and nursing teams to be released to attend cluster meetings will help foster a whole system approach and help tackle the current perception of ‘GP’ cluster networks. This would also promote access to training and education opportunities for the workforce.

The Welsh Government either needs to provide the funding to enable registered nurses working in general practice and Healthcare Support Workers to be released (and to pay for the necessary backfilling) or the GP practices themselves need to fund their release.

Leadership and strategic planning in primary care needs cannot be exclusively from a medical perspective. Holistic health prevention and tackling health inequalities require a broad range of health professional interventions. The Welsh Government needs to set some ambitious objectives around the number of nurses and other health professionals taking up leadership roles within their practices, clusters and at a pan-cluster level. In addition, The Welsh Government could consider opening-up GMS contracts so that nurses (for example, consultant nurses) can bid to provide primary care services as independent contractors.

An integrated system

GP services can be difficult for people to access. Most GP services now offer telephone appointments and some face-to-face appointments. However, different practices have different ways of working. Many GP practices, for example, only allow patients to make an appointment if they have had a prior telephone consultation. In order to get that telephone conversation, the

individual needs to ring at 8am and hope to get one of the few slots that are available. GP appointments are normally only available during 9am-5pm on a weekday. Out of hours primary care services are extremely variable across Wales. Very few GP services offer an out of hours visit. The public does have access to nurse-led advice from the 111 service, but if the issue requires a visual assessment, or an immediate treatment such as a prescribed pain killer, the only available suitable service for people to be referred to is the A&E department. This is also an issue for care homes and for people living at home but receiving care from the community nursing team.

Primary care services as a whole need a redesign to serve the community 24/7. If, for example, nurse practitioners with independent prescribing were available in community nursing teams in care homes, and running out of hours services, this would reduce unnecessary hospital admissions and pressure on the ambulance service.

Another problem is the lack of communication between primary care services and secondary care services, which often leaves patients having to re-explain their symptoms, conditions or needs to each service which they encounter.

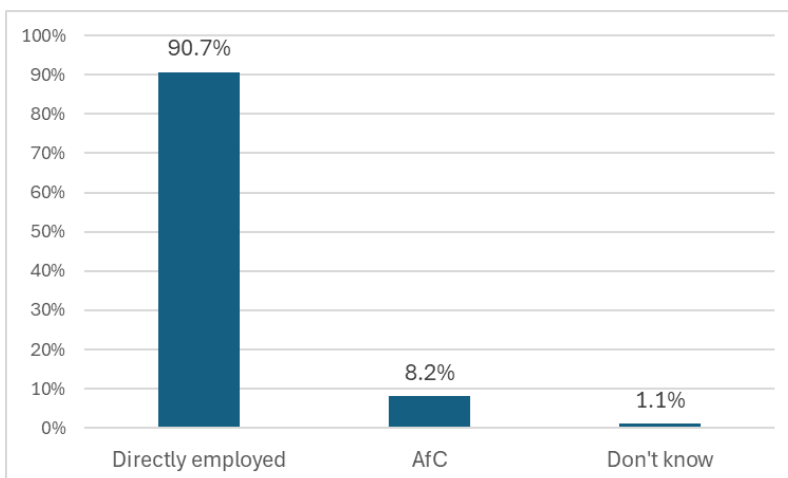
To address this issue, RCN Wales believes that the Welsh Government should help foster an integrated referral system, where communication is seamless between general practices and other health services that a patient may need to access.

The views of registered nurses working in general practice in Wales

In early 2025, the Royal College of Nursing conducted a survey of registered nurses working in general practices working in Wales and across the UK.

There were 527 respondents in Wales, with employed directly by their practice (90.7%), with a further 8.2% employed on Agenda for Change (AfC) contracts.

Table 4 – Wales



Of the respondents employed on AfC contracts, 82.9% stated they had received the 5.5% pay uplift for 2024/25. 17.1% said they had not received the uplift. Local health boards should ensure that registered nurses working in general practice employed on AfC contracts receive the uplift that were promised to them as a matter of urgency. RCN Wales calls on the Welsh Government to take a strong directional lead to ensure that this happens.

Worryingly, of those directly employed by primary care practices, 75.4% of nurses in Wales said that their employer had not spoken to them about this year’s pay award.

Respondents who are directly employed appear to be more negative than those on AfC contracts about transparency, with over six in ten stating their employer is not transparent about how their funding is calculated and the funding that they receive from the Welsh Government:

Table 5 – Wales

“Has your employer been transparent about the funding they receive from government?”

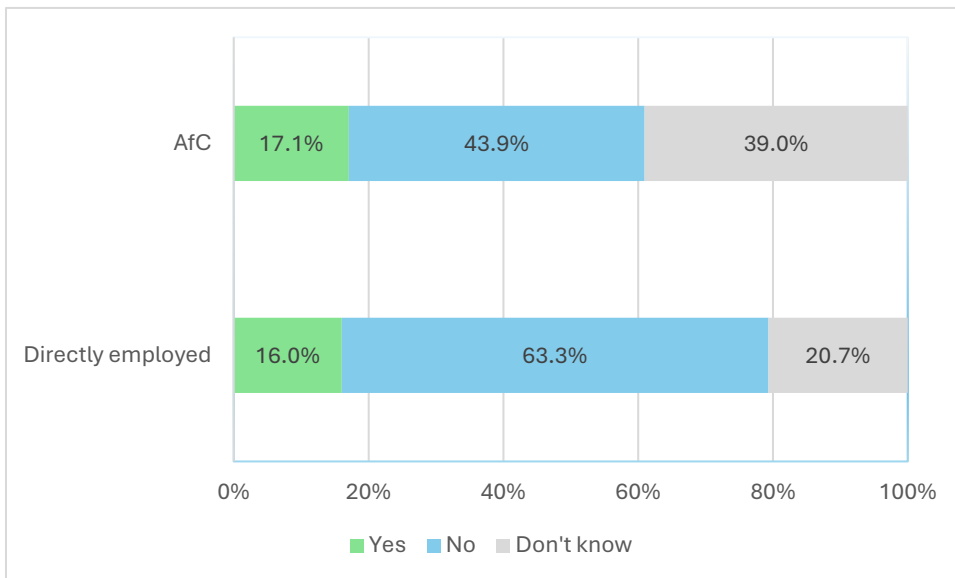
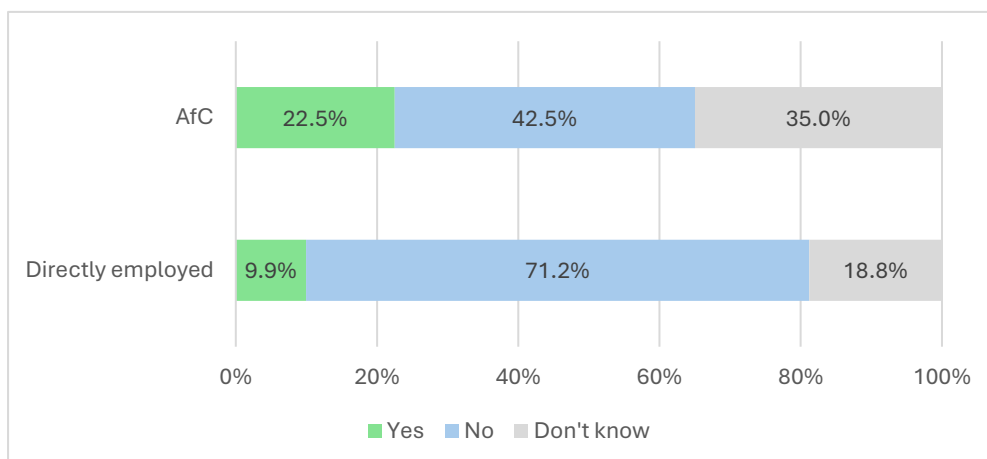


Table 6 – Wales

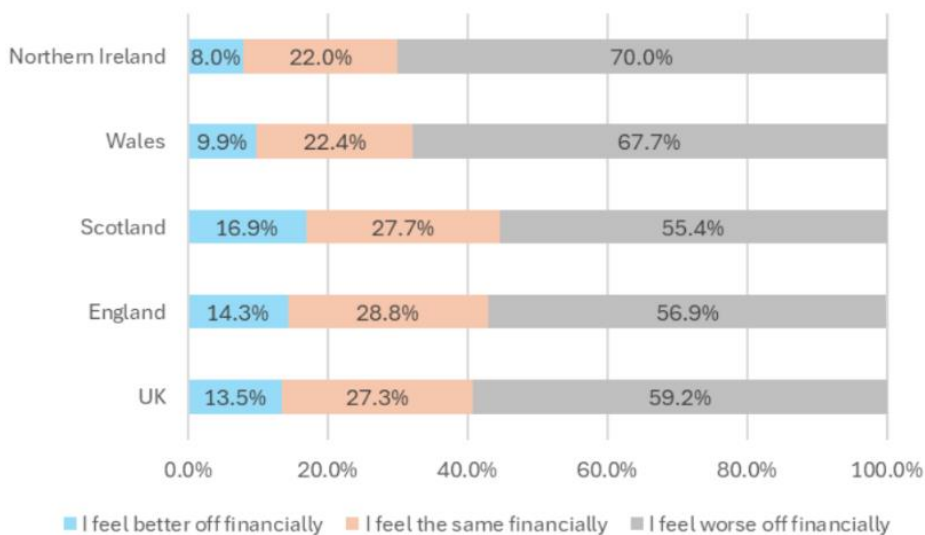
“Has your employer been transparent about how your pay is calculated?”



The survey results also showed that, of the four UK nations, Wales had the second highest proportion of registered nurses working in general practice who said that they felt that they were worse off financially this year than they were five years ago, and the second lowest proportion of registered nurses working in general practice who said that they felt that they were better off financially this year than they were five years ago:

Table 7 – UK comparison

“Thinking about your finances today, and your finances five years ago - do you feel better or worse off financially?”



Unless registered nurses working in general practice feel valued at work, and unless they feel financially secure in their roles, they will leave GP settings. It is therefore crucial that employers are transparent with registered nurses working in general practice about their pay and that these nurses are not kept in the dark. Registered nurses working for GP employers should be put on terms equivalent to Agenda for Change.

Directly Employed NHS Wales Nurse Practitioners

Nursing as a profession is not just about caring for those who are unwell, it is also about promoting good health. Not only are registered nurses essential when it comes to treating and preventing ill-health, but they also play a key role in fostering good health.

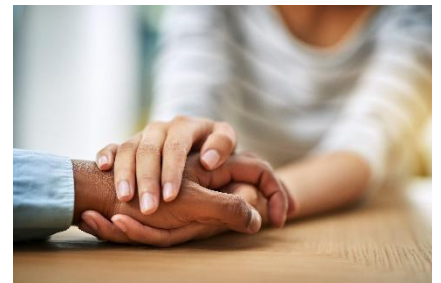
Because registered nurses witness the impact of health inequalities on the health of both patients for whom they provide care and the wider population, they have a clear stake in the direct and underlying causes of ill health. Nurses carry out direct interventions for individuals and families; assess need and help ensure that the right services are commissioned; make sure vulnerable groups are prioritised; provide leadership; support community empowerment; and advocate for change.

Where there is a shortage of general practice services, or where there is a particular local need to tackle health inequalities, primary care clusters should consider employing primary care practitioners to meet local need. Such practitioners could include nurse practitioners who can independently prescribe. There is already a precedent for creating accessible health services in the community; community health services and sexual health services are present examples of this. In addition, the Welsh Government could consider opening-up GMS contracts so that nurses and other health professionals can bid to provide primary care services as independent contractors (as GP employers currently do).

Recommendations:

ACTION 1 – Primary care services that are responsive to local need

- The Welsh Government should ensure that primary care services are delivered based on the needs of the population across 24 hours, 7 days a week.
- The Welsh Government could also consider opening-up GMS contracts so that nurses (for example, consultant nurses) can bid to provide primary care services as independent contractors.
- The Welsh Government should help foster an integrated referral system, where communication is seamless between general practices and other health services that a patient may need to access.



ACTION 2 – Invest in ANPs to reduce pressure on GPs

- Adequate numbers of Advanced Nurse Practitioner posts are needed across Wales to strengthen primary care teams and deliver more timely services for the public.
- The Welsh Government should encourage, potentially through the GMS contract, GP employers to achieve this. Alternatively, there could be nurse-led services as part of the GMS contract or Advanced Nurse Practitioners that are directly employed by NHS Wales.



ACTION 3 – Invest in primary care education

- HEIW – following advice from the RCN and other royal colleges as well as from primary care clusters – should increase specialist primary care education and nursing student placements, including strengthening Welsh language provision.



Coleg Brenhinol Nyrsio Cymru – Royal College of Nursing Wales

The RCN is the world’s largest professional body and trade union for nursing staff, representing over half a million members, including nurses, midwives, health visitors and nursing students, with around 30,500 members in Wales. The majority of RCN members work in the NHS with around a quarter working in the independent sector. The RCN works locally, nationally and internationally to promote standards of care and the interests of patients and nurses, and of nursing as a profession. The RCN is a UK-wide organisation, with its own National Boards for Wales, Scotland and Northern Ireland. The RCN is a major contributor to nursing practice, standards of care, and public policy as it affects health and nursing. The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies.