

## Frequently Asked Questions: General Practice Assistants

The following questions regarding General Practice Assistants (GPAs) and associated training have been collated with NHS England colleagues to support Primary Care Networks (PCNs), Training Hubs, GP practices and other primary care colleagues.

### General enquiries

- **Where should I direct my enquiry about the inclusion of the GPA role in the additional roles scheme?**  
Please direct all enquiries to [england.primarycareworkforce@nhs.net](mailto:england.primarycareworkforce@nhs.net).
- **Where should I direct my enquiry if I wish to undertake the accredited training offer?**  
Please direct all enquiries to [transformation@hee.nhs.uk](mailto:transformation@hee.nhs.uk).

### The GPA role

- **What is the GPA role?**  
The GPA role was introduced in 2018 to safely deliver a combination of routine administrative tasks and some basic clinical duties in the general practice setting. Their focus is on supporting General Practitioners in their day-to-day management of patients, specifically aimed at reducing the administrative burden, making best use of consultations and supporting those particularly vulnerable to isolation who are regular attenders at the practice.
- **What is the added value/benefits of introducing GPAs?**  
Where GPAs have been introduced, GP practices have reported:
  - Administrative tasks previously undertaken by GP's and now completed by GPAs, can support in releasing GP's time to care, and result in significant savings as follows:
    - GPAs undertaking insurance proposal reports, could potentially save £425 per week/£22,100 per annum
    - In addition, GPAs undertaking other reports, could potentially save £813 per week/£42,250 per annum,
  - Enhanced team working where GPA's felt more integrated into the team and able to provide cross cover for other team members (e.g phlebotomy clinics and covering practice manager workload)
  - Improved turnaround for Personal Independence Payments (PIPS) and Employment and Support Allowance (ESA) which helped to improve population health.

*Quotes from GP practices:*

*"We required somebody to help the duty doctor in performing certain tasks, including admin and clinical, during their on-call day. **If this was not introduced, the duty doctor would be spending a significant proportion of their on-call day on performing these tasks**, when they could instead be more focussed on providing appropriate clinical care to patients and supervision of junior clinical staff".*

*"The role has **been well received by patients**. This independence and enthusiasm has been especially visible during the **Covid peak**, where GPAs have cross covered patient services such as emergency ECGs,*

*supported regional response teams and broadened their roles (within their competencies) to support the practice”.*

*“Having additional **clinically trained staff who also had administrative expertise** through the COVID peak has been supportive for the whole team.*

*“**Supporting the GP with admin tasks** including the completion of referral forms, mental health and dementia care plans, high risk drug monitoring and clinical coding letters”.*

*“Key achievements was the introduction of the **GPA managing DOCMAN letters**/ emails early in the mornings and effectively identifying pertinent information and any urgent clinical tasks that were needing attention from the clinician before the end of surgery which was when historically we would look at DOCMAN letters”.*

- **How can I recruit a GPA?**

The General Practice Assistant role has recently been introduced into the Additional Roles Reimbursement Scheme. PCNs can immediately start recruiting to the role, predominately through trainee positions, and can claim reimbursement for the salaries and some on-costs of these staff.

Practices are also able to recruit staff directly, separate to the Additional Roles Reimbursement Scheme.

- **What are the routes to training and developing GPAs?**

Staff are trained in practice with on-job training and development led by GP mentors, in line with the [role outline](#) and [national competency framework](#).

Staff seeking accreditation can create a portfolio of evidence which can then be accredited by an education provider. Accreditation via the education provider ensures consistency, quality and portability of the GPA role.

Staff are also able to enrol on a formal accreditation programme to support this process. This programme provides structure, guidance and assistance with competency development, as well as support for GP mentors. Due to the recent inclusion of GPAs as part of the ARRS scheme, we intend to expand the structured, accredited route based on PCN demand. We expect that additional places will be available for trainees next year.

The process of on-job training, against nationally set competencies, under the direction of a GP mentor remains the same under both the accredited and non-accredited routes.

If you wish to register your interest in the accredited route or have any further queries, please contact [transformation@hee.nhs.uk](mailto:transformation@hee.nhs.uk).

- **Can the GPA role be recruited externally?**

Trainee GPAs can be recruited externally or from your existing staff base. There is also a small number of certified GPAs who have already completed the accredited programme.

- **Is there any assistance with recruitment to posts, similar to the flexible apprenticeships?**

Support with recruitment may be available via your local Training Hub and local commissioners as is the case for other ARRS roles.

- **Is there a cap on numbers for Trainee GPAs?**

No, recruitment is not capped.

- **Can each practice interpret what the job role will be, or will there be a requirement for them to choose either a non-clinical or 'hybrid' role (clinical and non-clinical)?**  
PCNs practices can choose how to deploy staff in this role, within the outlines of the competency framework and role description.
- **Can 'non-accredited' GPAs move between practices?**  
Yes, recruitment decisions are made by individual PCNs, which hold responsibility for ensuring that staff meet the requirements of the DES.
- **What are the implications on indemnity and public liability insurance and/or arrangements?**  
GPAs will operate under the contract, guidance and supervision of GPs, as with other ARRS roles. GPs hold responsibility for services delivered under their contract.
- **Does the mentor have to be a GP, or can this be another registered professional within the PCN, to assist with capacity issues?**  
The GPA's primary mentor should always be a GP, who may draw on support from other health professionals in the practice/PCN.

Should the practice wish to use healthcare professionals or other colleagues to support the GPA with elements of training/learning, they must be fully endorsed by the GP practice following a risk assessment within the practice, e.g. for indemnity/insurance purposes. The practice team must also be fully confident that the healthcare professionals/colleagues are fully trained and qualified to support the learner. Any concerns or questions must be relayed to the GP mentor.

Under the accredited route, the GP mentor has overall responsibility for signing off the whole programme and all clinical domains. However, the practice may also choose to use a secondary mentor to support GPAs in the non-clinical elements of the course, who can then sign off non-clinical domains. The secondary mentor must refer back to the GP Mentor if they have any concerns or questions, and the GP mentor remains accountable overall.

### Accredited programme

- **What is the accredited programme?**  
The accredited programme is an experiential course based on a competency framework that covers 5 domains (2 clinical and 3 non-clinical):
  - Care Certificate (clinical)
  - Clinical (clinical)
  - Communications (non-clinical)
  - Administration (non-clinical)
  - Managing health records (non-clinical)

With support from their GP mentor, GPAs will work through the competencies within the framework and produce evidence of understanding for the GP mentor (or secondary mentor) to sign off.

Upon completion and submission of the evidence portfolio, further verification will be undertaken and submitted to an exam board for certification.

- **When will the accredited programme pathway be available?**  
Due to the recent inclusion of GPAs as part of the ARRS scheme, we intend to expand the structured, accredited route based on PCN demand. We expect that additional places will be available for trainees in 2023.

- **Is there a plan to commission the accreditation programme centrally or will this need to be planned and commissioned at a local level?**

The accreditation programme will be commissioned centrally, based on local demand.

If you wish to register your interest in the accredited route or have any further queries, please contact [transformation@hee.nhs.uk](mailto:transformation@hee.nhs.uk).

## Funding

- **What funding is available for the GPA roles and training?**

Primary Care Networks are able to claim reimbursement for the **salaries and some on costs** of GPs hired through the Additional Roles Reimbursement Scheme (ARRS). Details of the scheme, and available levels of funding can be found in the [Network Contract DES](#)

For those wishing to also undertake the accredited programme, **individual course fees will be covered**, and you will need to register your interest with [transformation@hee.nhs.uk](mailto:transformation@hee.nhs.uk). We intend to expand the structured, accredited route based on PCN demand, and we expect places will be available for trainees next year.

- **Can individual GP practices claim additional roles reimbursement for GPs?**

The [Network Contract DES](#) sets out that 'Additional Roles must:

- i. be embedded within the PCN's Core Network Practices and
- ii. be fully integrated within the multi-disciplinary team delivering healthcare services to patients'

Staff can be employed either by the PCN (if it has set itself up as an organisation, rather than a collaboration of practices), by individual practices within the PCN or by a third party.

Reimbursement for staff flows through a 'nominated payee' (either the PCN, if an organisation, or a lead practice within it). As such, the PCN will be able to claim and distribute reimbursement to GP practices within their network, or providers they have commissioned to deliver services on behalf of the network.

We expect that, in most cases, the GPA will work closely with a single GP, or a small number of GPs, and primarily in a practice setting.

- **Can I receive ARRS funding from Oct 2022 onwards for a GPA who is currently studying on the accredited programme?**

Yes. GPs were not included in PCN baselines. As such, PCNs are able to employ GPs, and claim reimbursement for their salaries as with any other additional role, if staff meet the requirements outlined in the Network Contract DES.

- **Once the GPA has completed training and moves from Trainee GPA to GPA, are they still eligible for funding?**

Yes

- **Is backdated funding available for GPA who has already passed the accredited programme and hired into the role?**

No, PCNs can only claim reimbursement for GPA salaries from the point at which the role was introduced in the Network Contract DES. It is not possible to claim funding for back dated salaries prior to that date.

### Training

- **Is there any other training that we can offer to support the GPA prior to the accredited programme coming online?**

The process of on-job training, against nationally set competencies, under the direction of a GP mentor remains the same under both the accredited and non-accredited routes. GP mentors can begin supporting trainee GPAs to build experience, and portfolio of evidence, against these competencies, just as they would under the accredited route.

GPAs may also take external courses to build and evidence competencies – for example, the Care Certificate and phlebotomy. Guidance on developing / evidencing competencies, mentoring, and other supporting resources can be found here: [GPA e-learning for health](#)

- **Will there be any funding support for training courses for clinical duties?**

The ARRS scheme provides reimbursement for salary costs and does not provide funding for training courses. However, PCNs can draw on other sources of funding to support the development of staff, please refer to Table 1 in the [Network Contract DES](#)

The accredited route also provides financial support which could be used to fund training courses. Applications for this route have now closed, but there will be future opportunities to apply within the next year. To register your interest, please email [transformation@hee.nhs.uk](mailto:transformation@hee.nhs.uk)

### Support

- **Will there be any support offered for GP practices/PCNs or will this be the responsibility of the GP practice?**

GPAs will be expected to develop competencies, under the supervision of a GP, in line with the competency framework. Resources to support GPAs and GP mentors can be found here: [GPA e-learning for health](#)

GPAs on the accredited programme, and their mentors, will receive additional support to work towards their certification from the accreditation provider and local or regional training hub.