

Men's Health



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November 2025

Acknowledgements:

Miss Jyoti Shah, Consultant Urologist

Dr Owen Barron, GP Partner, Balance Street Surgery

Mr Ian Sabberton, Primary Care Mental Health, MPFT

Mrs Louise Brady, Primary Care Lead NHS England

Mrs Rachel Viggars, Strategic Nurse Lead, Staffordshire Training Hub

Background

Poor health outcomes for men are a national concern. On average men die 4 years earlier than women and in the most deprived areas of the country, it can be around 10 years earlier (Local Government Association, 2024). A number of health conditions disproportionately affect men, for example: cancer, cardiovascular disease and type 2 diabetes, also men are more likely to die by suicide. Furthermore, men's health is now a priority as Health and Social Care Secretary Wes Streeting has announced plans to develop a Men's Health Strategy for England.

General Practice Nurses (GPN) are in a good position to make an important impact on men's health. Within primary health care there are many opportunities to engage with men and reach disadvantaged groups to prevent premature death.

This educational pathway has been designed to fill a gap in training and education for nurses and for those registered health care professionals working in additional roles at an advanced level in general practice. It will assist assessment, examination, investigation, management and referral as appropriate, of men presenting in the clinical setting. The skills and competencies required will be formally assessed at the end of the module, in a similar way to the Cervical Screening training pathway (NHS England, 2024). Following successful completion, a 3 yearly update will also be recommended to keep skills up to date.



Aim & learning outcomes

Aim:

To provide a comprehensive educational package to enable safe and effective assessment and clinical management of men's health issues.

Learning outcomes (LO):

LO1: Explore a range of men's health issues and discuss the pathophysiology and management

LO2: Relate theory to physical assessment and clinical examination skills to recognise suspicious signs and symptoms and refer appropriately

LO3: Critically apply decision making and clinical management skills across a range of men's health issues.



Introduction

This educational training package will include:

- 12 hours theory
- 3 hours practical (minimum), which can also include simulation and use of pelvic models in a skills laboratory
- Final practice assessment with a clinical supervisor for examination skills including physical health assessment and Digital Rectal Examination (DRE)
- Visit to Genito-urinary clinic
- Visit to Urology clinic
- Opportunity to shadow mental health colleagues and undertake suicide prevention training

The core capabilities required to complete this training have been mapped across from the Primary Care and General Practice Career and Core Capability Framework (Health Education England, 2021) and the educational package has been structured around the 4 domains:

Domain A: Personalised collaborative working and health promotion

Domain B: Assessment, investigations and diagnosis

Domain C: Condition management and treatment

Domain D: Leadership and management, education and research



Learning a new skill

General Practice Nurses have adapted and developed their roles in many ways and already undertake more advanced and specialist work to enhance patient care (Storey and Last, 2022). However, some of the competencies within this training package may involve learning a new clinical skill and trainees will therefore need to enlist a clinical supervisor within their workplace to sign off their competencies at the end of the programme.

Suitable clinical supervisors are General Practitioners or Advanced Clinical Practitioners who currently undertake assessment and management of undiagnosed or undifferentiated medical conditions.

A practical assessment document with self assessment and clinical supervisor assessment is available for completion.

This training programme it is not suitable for Nursing Associates, Health Care Support Workers and other General Practice Assistants due to the enhanced & advanced level of practice involved.



GPNs - Learning agreement

Practicalities of your learning agreement.

1. Set a date to discuss how you are going to achieve completion of the required competencies with your clinical supervisor.
2. Undertake a SWOT analysis and prepare a plan to assist your development.
3. Keeping a learning journal and reflective diary.
4. Review progress via self assessment at least monthly and arrange formal review with your clinical supervisor as a minimum upon commencement, mid-point and upon conclusion of the programme.



SWOT analysis

Strengths	Weaknesses
Opportunities	Threats



Personal development

Development plan	Action



England



Session 1 content

Men's Health issues	Clinical practice
Introduction & understanding advanced practice	
Anatomy & Physiology recap What might prompt a man to see a GP? What screening can we offer? Contraception and Sexual Health	GnRH, LH FSH Testosterone and Sperm production Discussion National Screening: Abdominal Aortic Aneurysm Bowel
Testicular and scrotal issues Painless scrotal swelling How do you describe a lump Self examination Red flags	History taking Examination Inspection Palpation Investigations and referrals Documentation
Penile and urethral issues Case studies x 3 Red flags	History taking Examination Inspection Palpation
Quiz	
Conclusion	



GPNs - Action Planning

Personal action planning for next module:

Action	Plan

Suggested reading:

Local Government Association (2024) Men’s Health: the lives of men in our communities [online]. Available at: <https://www.local.gov.uk/publications/mens-health-lives-men-our-communities>

Office for Health Improvement and Disparities (2024) All Our Health: personalised care and population health [online]. Available at: <https://www.gov.uk/government/collections/all-our-health-personalised-care-and-population-health> and <https://www.elfh.org.uk/programmes/all-our-health/>

<https://www.gov.uk/government/calls-for-evidence/mens-health-strategy-for-england-call-for-evidence/mens-health-strategy-for-england-call-for-evidence>

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Pelvic Obstetric and Gynaecological Physiotherapy (2024) Management of urinary frequency, urgency and urge incontinence [online] Available at: https://thepogp.co.uk/_userfiles/pages/files/resources/23xxxx_management_of_urinary_final_june.pdf



Session 2 content

Men's Health issues: Erectile dysfunction & cardiovascular risk Testosterone deficiency Urinary symptoms	Clinical practice
Anatomy & Physiology recap What might prompt a man to see a GP? What screening can we offer?	GnRH, LH FSH Testosterone
Erectile dysfunction Links to cardiovascular risk Premature ejaculation Retrograde ejaculation	History taking and information gathering Examination Investigations and referrals Documentation
Testosterone deficiency Gynaecomastia Case studies x 2	History taking and information gathering Examination Investigations and referrals
Urinary symptoms Overactive bladder, urinary tract infections, incontinence	
Quiz	
Conclusion	



GPNs - Action Planning

Personal action planning for next module:

Action	Plan

Suggested reading:

Office for Health Improvement and Disparities (2024) All Our Health: personalised care and population health [online]. Available at:

<https://www.gov.uk/government/collections/all-our-health-personalised-care-and-population-health> and

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UK Parliament (2025) Suicide Prevention. House of Commons Library [online]. Available at: <https://commonslibrary.parliament.uk/suicide-prevention/>



Session 3 content

Men's Health issues: Mental health	Clinical practice
Recap on last 2 sessions - Quiz	
Mental Health issues Mental health and wellbeing Depression Anxiety	History taking and information gathering Investigations Referrals and Specialist input Treatments Follow up
Suicide prevention and awareness	History taking and information gathering Investigations and referrals Red flags
Arranging time with mental health colleagues	
Conclusion	



GPNs - Action Planning

Personal action planning for next module:

Action	Plan

Suggested reading:

BMJ (2023) Treatment of lower urinary tract symptoms in men in primary care using a conservative intervention: cluster randomised control trial (TRIUMPH) [online]. Available at: <https://www.bmj.com/content/383/bmj-2023-075219>

NICE (2015) Urinary tract symptoms in men: management [online]. Available at: <https://www.nice.org.uk/guidance/cg97>

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NICE (2025) Suspected Cancer: Recognition and Referrals [online]. Available at: <https://www.nice.org.uk/guidance/ng12>

Shah, Jyoti (2022) Fighting Prostate Cancer: A Survival Guide. Derby: Magazine Production Company Ltd.



Session 4 content

Prostate disease and cancer: Benign Prostatic Hyperplasia Prostate cancer Other cancers	Clinical practice
Benign Prostatic Hyperplasia	History taking and information gathering Examination Treatment Referrals
Prostate cancer	History taking and information gathering Investigations Referrals and Specialist input Treatments Follow up
Other cancers: Penile, bladder, kidney, metastatic disease and cord compression, haematospermia	History taking and information gathering Investigations and referrals Red flags
Arranging time with urology clinic	
Conclusion	



International prostate symptom score (IPSS)

	Not at all	Less than 1 time in 5	Less than half the times	About half of the time	More than half the time	Almost always	Score
Incomplete emptying Over past month how often have you had a sensation of not emptying your bladder completely after you finish urinating?	0	1	2	3	4	5	
Frequency Over past month how often have you had to urinate again less than 2 hours after you finished urinating?	0	1	2	3	4	5	
Intermittency Over past month how often have you found you stopped and started again several times when you urinated?	0	1	2	3	4	5	
Urgency Over past month how difficult have you found it to postpone urination?	0	1	2	3	4	5	
Weak stream Over past month how often have you had a weak urinary stream?	0	1	2	3	4	5	
Straining Over past month how often have you had to push or strain to begin urination?	0	1	2	3	4	5	
	None	1 time	2 times	3 times	4 times	5 or more	
Nocturia Over past month how many times did you get up to urinate from the time you went to bed until the time you got up in the morning?	0	1	2	3	4	5	
Total IPSS Score 0-7 mild, 8-19 moderate, 20-25 severely symptomatic							



England

Skills for
Health

Quality of life due to urinary symptoms

Quality of life due to urinary symptoms	Delighted	Pleased	Mostly satisfied	Mixed equally satisfied/dissatisfied	Mostly dissatisfied	Unhappy	Terrible
If you were to spend the rest of your life with your urinary condition the way it is now, how would you feel about that?	0	1	2	3	4	5	6



Barry, M.J., Fowler, F.J., O'Leary, M.P., et al., (1992) The American Urological Association Symptom Index for benign prostatic hyperplasia. International Prostate Symptom Score (IPSS) *Journal of Urology*, 148, 1549 -1557.

Quiz

Question	True or False
1. Compared to women, men live 4 years less on average	
2. Three out of four suicides are men	
3. The UK has a Prostate Screening Programme	
4. A urine infection will not affect PSA results	
5. Gynaecomastia is a presenting symptom in testicular cancer	
6. Hydrocele feels like a 'bag of worms'	
7. Blood tests for testosterone should be fasting samples	
8. Lower urinary tract infections in men are very common	
9. Caffeine is a bladder irritant	
10. Erectile dysfunction is not an indicator for vascular disease	



GPNs - Action Planning

Personal action planning to complete the training programme:

Action	Plan

Suggested reading:

College of Sexual and Reproductive Health (2025) Vasectomy e-learning module [online] [New vasectomy e-learning module | CoSRH](#)

Curtis, S., Digby, K., Walker, R. (2024) Hot Topics Men's Health. NB Medical.

Office for Health Improvement and Disparities (2024) All Our Health: personalised care and population health [online] accessed 26 October 2024. Available at: <https://www.gov.uk/government/collections/all-our-health-personalised-care-and-population-health> and

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Storey, K., Last, R. (2022) A Nurse's Survival Guide to General Practice Nursing. Elsevier.



Theory meets Practice

The theoretical part of this training programme has now been completed, and it is time to complete the practical elements and final assessments with your clinical supervisor who will sign off your competencies.

The next few slides highlight the elements of the practical assessments, but the practice document should be completed first as a self assessment, followed by a formal assessment by your clinical supervisor.

Any queries can be raised with the Men's Health programme team or Gill Boast directly via email:

Gill.boast@nhs.net



Male anatomical health

Summary of core clinical skills (taken from Health Education England (2021) Core Capabilities Framework)	Self assessment	Clinical Supervisor assessment
1. Demonstrate knowledge of the anatomy and physiology of the male genitalia and related systems, including prostate and breast.		
2. Demonstrate knowledge of how to recognise the influence of mechanism of any injury, psychological, family and occupational history, age, symptomatic and clinical signs relevant to normal and abnormal anatomy and physiology in people.		
3. Have knowledge and understanding of issues related to male and female anatomical health.		
4. Be aware of a variety of potential issues that may present differently in males, including sexual abuse, erectile dysfunction and depression.		



England



Male anatomical health

Summary of core clinical skills (taken from Health Education England (2021) Core Capabilities Framework)	Self assessment	Clinical Supervisor assessment
1. Understand the implications of an existing relevant condition. 2. Take a structured and appropriate history including sexual health. 3. Assess disease risk factors specific to male anatomy. 4. Understand how to refer, in a timely manner, using national and local guidelines. 5. Be able to write a comprehensive and appropriate referral letter. 6. Have a clear understanding of adult safeguarding issues. 7. Be able to carry out male genital examination, prostate examination or breast examination where appropriate with consent. 8. Request further investigations appropriately		



Male anatomical health

Summary of core clinical skill assessment (taken from Health Education England (2021) Core Capabilities Framework for ACPs in GP/Primary Care)	Self assessment	Clinical Supervisor assessment
Testicular pain		
Testicular lumps		
Genital rashes/irritation		
Urinary symptoms		
Penile pain		
Penile discharge		
Erectile dysfunction		
Groin swelling		
Breast symptoms		
Pelvic pain/mass		



Male anatomical health

Summary of core clinical skills (taken from Health Education England (2021) Core Capabilities Framework for ACPs in GP/Primary Care)	Self assessment	Clinical Supervisor assessment
Temperature		
Pulse rate and blood pressure		
Waist circumference		
Male genital examination, including inspection and palpation of penis, testicular examination.		
Prostate examination		
Abdominal examination assessment for lymphadenopathy		
Need for investigations:		
Ultrasound – testicular		
Blood tests – FBC, U&E, HbA1c, Lipids, Testosterone, SHBG, FSH/LH, +/- Prolactin, CA125, PSA		



Practical assessment

Introduction	Clinical practice & examination	Clinical Supervisor sign off
Inspection • Testes • Penis • Groins and thighs	Any enlargement/obvious mass? Any skin changes, rash or infestation? Ask patient to retract foreskin and inspect glans/prepuce Any lesions or rash? Any discharge?	
Palpation • Examine each testis in turn	Examine with patient standing and 'normal' testis first Palpate each testis with both hands between thumb and index finger Any swelling or irregularity? Any tenderness or pain? Identify the spermatic cord and epididymis Palpate the rest of the scrotum Assess groins for swelling Transilluminate with torch	
Conclusion	Thank patient and ask them to redress Explain findings and management plan	



Digital Rectal Examination



Introduction	Clinical practice & examination	Clinical Supervisor Sign off
Inspection	Position patient in left lateral with knees pulled up toward chin and buttocks at edge of the couch Explain first that will look down below Ensure good lighting and inspect carefully Gently part the buttock to expose anus and natal cleft Check skin integrity and condition Look for rashes, lesions, skin tags, pilonidal sinus, fissures, fistulae, swellings protruding from the anus	
Palpation • Prostate • Size • Sulcus between left and right lobes • Consistency	Lubricate your right index finger Explain that you are about to start the examination and ask patient to try to relax Insert tip of finger into the rectum Check if the rectum is loaded with faeces or empty Assess anal tone and examine the rectal walls. Ensure full 360 degree sweep, anticlockwise and clockwise Remove finger and check glove for blood, melaena, stool, mucous Clean the anal area with a tissue	
Conclusion	Thank patient and ask them to redress Explain findings, management plan and any further investigations	

Conclusion & close

This Men's Health training programme has been designed for registered nurses and allied healthcare professionals to address the current gap and inequality in educational pathways compared to Women's Health.

Whilst a Men's Health Strategy is awaited, this programme of study can assist practitioners to improve the care of men and help to prevent some of the premature deaths. Nurses and other allied healthcare professionals should consider how they can improve the outreach to men so that prevention and earlier intervention of ill health can be offered to all.

This training programme can be studied at the trainee's own pace, but it is recommended that the programme should take between 6 – 9 months with the final practical assessments taking place upon completion and a 3 yearly update thereafter.



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NICE (2025) Suspected Cancer: Recognition and Referrals [online]. Available at: <https://www.nice.org.uk/guidance/ng12>

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