

Norfolk and Waveney Local GP Fellowship Scheme

Background Information

What is the GP Fellowship Scheme?

Principally this is about improving the quality of care delivered to the patient via personal and professional growth of a GP. The GP Fellowship scheme offers the opportunity to recruit, retain and develop GPs in Norfolk and Waveney. By increasing the skills of our GPs in the primary care setting, we contribute to a future proofing of our workforce. As a result of this more patients will be seen in the primary care setting alleviating the immense pressure that we are seeing in other areas of our healthcare systems.

GP Fellowships offer newly qualified, but has flexibility to accommodate GPs in all stages of their career, the opportunities to train and gain experience for varied and stimulating careers. A GP Fellowship is a 1 year salaried post typically for recently qualified clinicians within the first 5 Years of completing their training.

Fellowship posts provide the opportunity for GPs to consolidate and develop in either clinical or non-clinical capacities, or may even serve as an opportunity for newly qualified GPs to ease into the demands of full time general practice whilst developing professionally. This may involve posts in hospitals, CCGs, GPPOs, charities and more, studying anything from clinical skills, leadership development, education or managerial capabilities – all within a supportive environment.

What is the structure of the GP Fellowship Scheme?

The general structure is that a GP completes two days in general practice completing normal duties, two days in a secondary host organisation completing work and training in a specialist area, then finally they would complete one day per week pursuing an education element that would support the practical and educational component of their Fellowship. There is flexibility allowed to this general structure, which can be assessed on an individual needs basis.

Project work informs the nature of the Fellowship, and is agreed with the Fellow, GP host practice and secondary host organisation so that the GP Fellowship is mutually beneficial for all parties. The GP host practice can get key clinical GP support and expertise back into their primary care services, the secondary host can also receive that key clinical involvement from the Fellow and the GP will be subject to key authentic learning activity and experience.

The Employment Package

The Fellowship would normally be for a 12 month period. There will be a single employer, which is the GP practice. The GP Fellow can be a new or existing GP to the GP practice, as long as they are in the first five years of practice – with special exception based on an individual assessment.

Specialist Host

As well as working at a GP practice the Fellow will have a working placement in a partner/host organisation, including but not limited to:

- STP/ICS leadership organisation
- CCGs
- GPPOs /Federations / Local Care Networks
- Secondary and community care trusts
- Community and voluntary sector
- Local Workforce Advisory Boards
- Higher Educational Institutions

The five broad categories of Fellowship with a Specialist Host:

1. System leadership – Supporting emerging GP leaders within the local healthcare system - CCGs, STP/ICS, training hubs, HEE. This may include a formal qualification in leadership e.g. PG Cert.
2. Health equity – Using the Fellowship programme to reduce health inequalities.
 - a. Fellowships that offer clinical placements in practices in under-doctored or socio-economically deprived areas.
 - b. Specific health equity Fellowships e.g. Deep End pioneer, Trailblazer GP.
3. Clinical – Helping GPs to develop a clinical special interest e.g. dermatology, frailty, palliative care, urgent care, out of hours, etc. These Fellowships may often be driven by the individual's interests.
4. Academic – Supporting early academic careers, bridging the gap from pre-CCT ACFs to higher academic study.
5. Educational – Stimulating early career GP educators through involvement with undergraduate or postgraduate education and the attainment of postgraduate health professionals' education qualifications.

Funding

Partner organisations i.e. the GP Practice and the secondary specialist organisation are responsible for setting salary and terms and conditions for the Fellows, who should be paid for every session worked, including their personal development time whilst they are working at their practice or organisation.

Sessions Worked

- GP Fellowships should usually include a minimum of four clinical sessions in a GP Practice (2 days / 4 sessions per week) and one session of personal development time per week. Consideration may be given to applications that include two sessions of personal development where it can be demonstrated that time is required e.g. formal education / academic programmes.
- An integrated Fellowship offering opportunities to develop across clinical systems will usually include a minimum of three clinical sessions in GP practice, a minimum of two sessions in another clinical sphere of work and usually one session of personal development time per week.
- Personal development time (2 sessions per week) should be self-directed by the Fellow in areas of relevance to their Fellowship e.g. quality improvement activities, attendance at courses/university, time spent in other organisations. Alternatively, or running alongside this, the partner organisations or HEE local offices may arrange structured education/development time.

Flexibility will be considered to accommodate individual's circumstances. Part-time Fellowships will be available, which cover a 16 month period.

Salary and funding

The GP practice is the sole employer. They will pay the Fellow the full GP salary for the sessions worked in practice as the Fellow will be qualified to perform all GP duties and work plans.

The GP practice invoices the secondary host for the work they complete in the secondary host's organisation. The practice then pays the GP for these sessions through their own payroll systems.

For the GP practice:

- The GP's salary for their 1 day (2 sessions) per week of education is reimbursed from HEE. HEE reimburse 0.2 FTE (1 day) of the gross annual salary cost (£75,249 +26% on-costs). This equates to £9482 per session totalling £18,964 per year paid to the GP practice for the Fellow's two personal development sessions.

For Fellow:

- A total contribution of £5000 is available to support the educational component of the Fellowship from Health Education England (HEE).

For the secondary specialist host organisation:

- The secondary host is invoiced for the sessions that the GP Fellow completes at their organisation. At an agreed sessional rate that is some variation of a standard BMA contract, for example: 0.4 FTE (2 days / 4 sessions) of the gross annual salary cost (£75,249 +26% on-costs). This equates to £9482 per session totalling £37,928 per year (based on 2 days/ 4 sessions) paid to the GP practice for the Fellow's salary at the secondary specialist host.
- A £5,000 incentive payment is available that can be used towards the salary of the Fellow. This is to recognise that although the Fellow will perform work, they will still be learning and require supervision as necessary. This funding is via the Norfolk and Waveney Training Hub, who's funding for Fellowship grants is reviewed annually.

.What commitment is required by the Fellow?

- The programme will be undertaken for a minimum of a 1 year.
- All relevant studies must be undertaken.
- Project work to be completed as agreed by host employer.

What Commitment is required by the GP Employer?

- Salary payments for the days that the Fellow works within your organisation.
- Redirection/payment of salary from that comes from HEE or the secondary host.
- Recognition and support where appropriate that GP is undertaking Fellowship.

What Commitment is required by the secondary host /specialist Fellowship organisation?

- Salary payments for the days that the Fellow works within your organisation to be paid to the host GP practice, who then pays the Fellow through the host GP practice's payroll system.
- Clear brief on Fellow's area of work and key objectives/outcomes within the 12 months.
- Provide a key point of contact /supervisor to meet regularly and monitor performance and track agreed objectives.
- Placements should have an educationally approved primary care clinical supervisor who is reasonably available.
- The programme should have a mentor available from an appropriate education organiser (e.g. HEI, HEE, and Training Hub) and describe a process for interns to feed back on their programme.

- The Fellow should have an induction period, an induction meeting with their supervisor, a mid-point and an end of programme review with their supervisor.
- The internship programme should enable the post –holder to engage in multi-professional learning activities.

What support will the Norfolk and Waveney Primary Care Workforce team and Training Hub provide to the Employer/ Host?

- We will support organisations through the process.
- We will work with all parties to provide a whole employment offer, ensuring that there is commitment between the GP practice and specialist host to design a work plan for the GP Fellow which suits everyone's needs.
- We will work with Health Education England to provide any relevant documentation (e.g. learning logs for the GP Fellow) and sign post to Supervisors if required.
- We will manage funding opportunities via HEE to ensure payments are made towards the salary of the GP Fellow for the host practice.
- We will provide support, advice and guidance for both hosts and the GP Fellow during the year of employment to ensure the experience is a rewarding one for all.

Example Fellowships

We're interested in becoming a Specialist Host or GP practice for a Fellow!

What are the next steps?

- We already have interested candidates and ideas regarding a number of local GP Fellowship offers but we need Host organisations/ GP practices and commitment.
- We need to work with you to design an employment offer to advertise with our pool of applicants. Both parties will need to commit to joint funding of the post, and identification of secondary care areas to offer the GP Fellow must be agreed.
- If you already have an established relationship between Primary and Secondary Care / vice versa, then make the connection to colleagues yourself and bring us in as needed!
- We need to confirm employment offers by the end of March to secure HEE funding.
- Please contact Richard.Taylor29@nhs.net or to register your interest and start to design your offer.

GP Fellowships Scheme Frequently Asked Questions

1. What are the benefits of a Post CCT Fellowship?

The following quotes are from GP Fellows who have undertaken GP Fellowship programmes and articulate the benefits from a GPs point of view.

“The Fellowship has been amazing and opened so many doors for me.”

“It gave me a job for a year when I was unsure about my career path. In 18 months’ time I will be fully qualified to be a Medical Educator. It has enabled me to develop a portfolio career, which will be more interesting than a full time GP role. The Fellowship has really helped me find a flexible career”

“The Fellowship definitely helped improve my networks, especially spending time with the CCG.”

“The Fellowship has meant that I have developed different strengths, such as project management and experiencing and implementing the type of improvements that the NHS requires. This opportunity to have the time and permission to lead the project has been a huge benefit on a personal level.”

“I was unsure about my career as a full time GP in the UK and was seriously considering moving to Australia, where I had worked on a 6months placement.... Since starting the Fellowship, I have bought a house in the region, and now feel settled in the area.”

“For me the Fellowship was career saving and without it would I would have probably have left the profession.”

2. What is the purpose of a Post CCT Fellowships post?

The purpose of the Fellowship programme is to improve patient care. This includes enabling GPs to enhance their skills, encouraging them to work in Norfolk and Waveney, and involving them in projects that benefit patients.

The Fellowship is a development role rather than a service year, so evidence of the Fellows working beyond normal general practice will be required as an output of the programme.

There are normally three components of the Fellowships: **General Practice**, a **Project** and **Education and Training**.

General Practice

The GP practice is normally the employer and holds the Fellows contract. This should be either the BMA standard contract for Salaried GPs or a variation of this. The variations should be transparent and mutually agreed with all parties.

The project is the area of special interest that the Fellow will be working in. This defines the Fellowship. This may be clinical work with consultant colleagues, or CCG work developing or evaluating services, or working in a specific environment such as a prison or out of hours setting.

Education and Training

The Fellowship may well be the last time in a GP's career that they are given paid study leave and course fees up to £5,000 paid to gain a qualification. The Fellow can do any qualification that fits appropriately with the Fellowship project. This may be a clinical certificate/diploma or MSc or may be an MBA or leadership and management qualification. The education element does not necessarily have to be certificated but it could be on the job educational training or organisation specific if appropriate.

3. What is the duration for the Post CCT Fellowships post?

Normally it is 12 months, but part-time programmes are available that last 16 months are available.

The **full-time programme** will normally run for 12 months. The programme will allow for local variation in terms of content and clinical focus, but the following structure of Fellowships is how it may work:

- **40%** (4 sessions p/w) of **traditional general practice**, to develop clinical maturity as a GP. It is likely a GP practice will be the main employer.
- **40%** (4 sessions p/w) to deliver a programme of **additional skills development** beyond the MRCGP curriculum and relevant to the Fellowship aims, usually provided within a partner NHS organisation.
- **20%** (2 sessions p/w) of protected education and training time. It is intended that an **academic** underpinning will frame the programme and provide robust governance and quality assurance. This may involve completion of a Postgraduate Certificate. But consideration of local educational in-house programme with the host if appropriate.
- Fellows will have opportunity to attend local peer learning groups which will be run in each local area.

A **less-than-full-time** programme will be available. How this breaks down in terms of funding for the education and training element will be determined on a case-by-case basis.

4. What is the salary for a Post CCT Fellowship?

The GP Fellow should be paid at current market rates and salary will be agreed by employers and GP Fellow.

5. What funding is available to support the education and training component of the Fellowship?

For each Fellowship there is a discreet education and training allowance of up to £5000 to cover postgraduate tuition fees and other costs (which may include realistic supervision costs from the specialist host organisation) from HEE.

HEE will also reimburse £9482 per session per year (£18964 total) to the GP practice for the personal development session(s) aligned to the Fellowship.

6. Can applicants arrange their own placements?

No, although the scheme allows some flexibility and Fellows are usually able influence the content of the placements.

7. Can applicants pick their own proposal, or does it need to be one that has been pre-approved?

Placements and schemes need to meet the requirements of the Fellowship programme. Placements will be subject to competitive appointment however we hope to be able to match candidates with their choice of location and content. This would be discussed with the lead contact within the organisation prior to offers.

8. Can applicants stay at current practices?

This may be possible subject to the geographical location and the current post meeting the requirements of the scheme. In most cases if there is a GP already in practice then it is often easier to set up the other elements of the Fellowship so we welcome applicants who wish to stay in their current Practice.

9. If an applicant has already been offered a post, can they combine the Fellowship element?

This may be possible subject to the geographical location and the post meeting the requirements of the scheme. This would be discussed with the lead contact within the organisation prior to offers.

10. Is there a guarantee of a job at the end of the Post CCT Fellowship?

A post cannot be guaranteed but there will be support via the training hub for planning for career and service development after the cessation of the programme.

11. Will there be supervision for Fellows?

Each employing organisation will provide a named educational supervisor or mentor for each GP Fellow. The educational supervisor will provide ongoing support, enable the undertaking of extended general practice roles and will facilitate release from practice for.

12. How much time would you be working as a GP/ how much time in the other speciality?

The Fellowship programme normally consists of the following, if undertaken full time:

- 4 sessions will be in general practice (2 days per week)
- 4 sessions will be on specialist placement (2 days per week)
- 2 sessions will be educational training (1 day per week)

However as the scheme is local – reasonable flexibilities will be considered