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**Report of Joseph Chandy, Director of Commissioning, Strategy and Delivery – Primary Care, Durham Dales, Easington & Sedgefield and North Durham Clinical Commissioning Groups**

**Electoral division affected:**

Countywide

**Purpose of the Report**

1. At its meeting on 30 January 2019 the Health and Wellbeing Board received an update on the challenges faced by general practices and the initiatives being taken forward to support sustainability and transformation of general practice primary care in DDES and North Durham CCGs in line with national policy and local strategy. The purpose of this paper is to provide an update around workforce sustainability and an understanding of the impact on schemes put in place. As part of the County Durham CCGs Primary Care Strategy, GP workforce is one of the key aims, this linked into the GP Five Year Forward View (GP5FV) resulting in the development of a five point plan. NHS England (NHSE) and General Practitioners Committee (GPC) announced the forthcoming changes to the GP Contract from April 2020 these changes will have significant impact on the workforce position across Primary and Community Care. A County Durham workshop will be held in March to understand the implications and the Local Authority will be represented.

**Executive summary**

2. The General Practice Forward View, published October 2014, set out a new GP Resilience programme to support struggling practices. Although only practices themselves can change the way they work, to release time for care, the involvement and support of the CCGs has been essential to getting the most out of the programme.
3. Both CCG's received funding as part of NHSE GP Resilience programme which allowed us to scope out a range of initiatives resulting in the production of our five point plan. Listed below is an update for the Primary Care Commissioning Committees in Common( PCCCiC) on the initiatives introduced as either part of the GP5FV programme or CCG

implementation. As a result of the national strategy on workforce through the GPFV, the CCG developed the following 5 point plan.



## Recommendations

4. Members of the Health and Wellbeing Board are recommended to:
  - (a) Note the content of this report.

## **Background**

### **Initiatives to support Primary Care**

#### **International Recruitment**

5. The international recruitment programme, hosted by NHS England, aims to recruit 600 overseas doctors into general practice in 2017/18 and aim for a total of at least 2,000 doctors over a three year period. Recruitment from outside of the UK has made a valuable contribution in the NHS over recent years and forms an important part of the workforce supply strategy of NHS organisations.
6. The scheme provides support to doctors making this challenging transition from other countries whilst providing reassurance to the recruiting practice that the doctor who joins them will be a valued member of the practice team. Nationally the number of candidates coming through the scheme has been low; 14 candidates have been confirmed across England, with five being in the North region of which two GPs have taken positions in North Durham and a third is due to arrive in the autumn 2019 subject to GMC eligibility.
7. The numbers coming through the scheme have been disappointingly low and although North Durham has been successful in securing two GPs the central NHS England team are looking at other strategies to help to increase numbers and overcome barriers for candidates.

#### **Federated Salaried GPs**

8. The term federated GP means a GP working across more than one practice, providing flexibility to fit individual practice need. The CCGs worked with federations and practices to design and develop a federated GP model of delivery who would work with practices to provide a long term commitment to General Practice or for example a practice may benefit from hosting a GP post for up to 3 months to give a period of short term stability.
9. This scheme was designed to target newly qualified GPs, GPs who currently work outside County Durham and GPs who only do locum work. The scheme would not fund GPs who currently work in a substantive role in County Durham and leave that role to join this scheme.
10. Following this work expressions of interest were received from 3 practices and 1 federation in North Durham and 5 practices and 1 federation in DDES. Unfortunately, due to GP indemnity restrictions, this would not allow GPs to work across multiple practices and posed a risk to individual practices around litigation. Practices researched corporate indemnity but unfortunately at that time the project could not progress therefore it was

agreed to put this on hold. However the Government's state-backed clinical negligence scheme for general practice (CNSGP) came into operation on April 1, 2019. It covers clinical negligence liabilities arising from NHS patient care that takes place on or after that date therefore the CCG's will plan to explore the potential of this project being re-scoped to look at how this model can be based around PCNs. This will be included in the primary care programme of work.

### **GP Virtual Support**

11. The CCGs in conjunction with federations looked to develop a retained list of GPs and Nurses who would have the flexibility to respond in an emergency / at short notice to support potentially and retain in practices remotely to review bloods, telephone consultation etc.
12. As with the Federated Employed GP indemnity was also an issue resulting in this project being stopped. However as above the CCG's will explore the potential of this project being re-scoped to look at how this model can be based around PCNs.

### **NHSE - GP Retention Scheme (GP Career Extension)**

13. This national scheme led by NHSE offers a package of financial and educational support to help doctors who might otherwise leave the profession, remain in clinical practice. There are currently 3 GPs on the scheme within DDES CCG and 1 GP within North Durham CCG. 2 GPs previously approved to join the scheme within North Durham CCG have since left the scheme, one GP retired and the second GP left the practice, a reason was not provided to NHSE. All GPs in DDES remain on the scheme. There are no applications pending for either CCG (as at 20 September 2019). All those GPs who have been on the scheme for more than 1 year have been reviewed by Health Education England (HEE) and deemed as still appropriate for the scheme.

### **GP Career Start Scheme**

14. The GP Career Start Scheme is aimed at attracting GPs who are looking for the opportunity to take up a post in general practice at an early point in their career and offers them the chance for 'added value' personal development e.g. medical student teaching, minor surgery, etc., as well as benefit from a mentorship programme whilst at the same time trying to expand the role of primary care within the local health economy.
15. This approach fits with the *General Practice Forward View* in terms of workforce expansion and the vision to deliver an extra 5,000 additional doctors in the UK working in general practice by 2020. The scheme, run in partnership with Health Education England (HEE), has proved successful in expanding the GP workforce, with over 40 GPs recruited across County

Durham since the scheme commenced in DDES in 2015 and North Durham in 2016.

16. Currently there are 19 GPs on the scheme (2019 / 2021). A range of educational courses are provided through the dedicated learning sessions.
17. Four GPs have also accessed a range additional training which includes:
  - Palliative Care
  - Dermatology
  - Psychiatry (in conjunction with TEWV)
  - Public Health

Since the scheme began, the CCGs have invested over £400k with some match funding from Health Education England of £390k.

### **GP Resilience Programme**

18. Through additional resilience monies the CCGs provide additional resources into a range of initiatives including:

#### ***(a) GP Intending Trainers Scheme***

- (i) As CCGs we recognised the need to support Primary Care resilience. Currently there are 25 training practices across the CCGs geographical area. It was agreed to increase this number to support practice sustainability and resilience and increase the number of GPs who would consider becoming a GP Trainer.
- (ii) Through resilience funding financial support has been provided to practices at a total cost of £6,000 per practice, the costs covers course fees and backfill.
- (iii) 3 practices have been supported to date.

#### ***(b) Practice Merger Support***

CCGs developed a package of support for practice mergers, particularly relevant to those practices experiencing difficulty in continuing to manage their practice patient register and contracting obligations due to GP shortage and long term GP vacancies. This support is only available to full mergers. To date four practices across Count Durham have applied and three have been awarded funding to support the merger, amounts awarded to date totals £40k

The CCGs have financially supported practices who have been experiencing a range of difficulties:

- (a) Gardiner Crescent £10k to provide administrative support over the summer months, and HR support to manage the continuing absence of a number of staff. The funding enabled the management team to withdraw from the day to day provision so strategic issues could be

progressed. This also allowed the practice to focus on the up and coming CQC visit.

- (b) The Medical Group £10K to support the management of the significant demands on primary care from the Independent Hospital – Appletree Cygnet. The additional resource will support them to work into the unit for patients whose mental health makes it very difficult for the Appletree staff to support them to attend at the practice as they should do.
- (c) Oxford Road £1,300 to support the management and day to day running of the practice prior to an administrative merger taking place. Practice Manager Support provided over a 3 month period.
- (d) Consett Medical Group £5k to provide backfill following an unexpected bereavement in the practice.

### **General Practice Nursing Workforce (GPN)**

- 19. The CCGs employ 3 permanent Practice Nurse Links (1x 37.5 hours per week (currently on secondment to Health Education England till March 2020) and 2 part-time 1 x 24 hours and 1 x 15 hours per week). This secondment has provided the opportunity to temporarily increase the hours of the 2 part-time Practice Nurse Links and employ a Practice Nurse and Advanced Nurse Practitioner to undertake specific pieces of work till March 2020 which support GPN workforce development and retention e.g. clinical supervision, development and support for Advanced Nurse Practitioners. The funds have also been used to support a 12 month Career Start Practice Nurse post in Darlington.
- 20. The Practice Nurse Link role is a commissioned role and is hosted by North Durham CCG on behalf of the 3 local Clinical Commissioning Groups North Durham, DDES and Darlington. The Practice Nurse Links support the Director of Nursing in maintaining and promoting professional and clinical nursing standards within primary care and manage the Career Start Practice Nurse programme across County Durham.

### **County Durham Career Start Practice Nurse Programme**

- 21. The Career Start Practice Nurse programme was established in Derwentside in 2001 and expanded across County Durham from 2008 to 2019 now covering the whole county. The programme offers the opportunity for Registered General Nurses with an interest in primary care to apply for a Band 5 position (30 month fixed term contract) which enables them to develop a portfolio of skills and knowledge required by primary care. The Career Start Practice Nurses also provides cover to GP practices to allow practice based nurses to access professional

development. Career Start Practice Nurses are allocated a base practice and a mentor (experienced Practice Nurse). The mentor supports the Career Start Practice Nurses training and development with the Practice Nurse Links overseeing this scheme across County Durham.

22. To date 49 registered nurses have completed the Career Start Practice Nurse programme, 86% of these nurses are employed in primary care (7 nurses left the service). The rolling programme currently employs up to 10 Career Start Practice Nurses in County Durham and one 12 month Career Start Practice Nurse in Darlington.

### **Health Education England Nursing Associate role**

23. The Nursing Associate role is a new support role that sits alongside existing healthcare support workers and fully-qualified registered nurses to deliver hands-on care for patients. The programme has been available since 2017 the first 2 qualifying Nursing Associates in the North East are from County Durham practices. There are currently 4 trainee Nursing Associates across DDES and ND CCGs practices. Trainee Nursing Associate funding is available until March 2020.

### **Open University Registered Nurse Degree Apprenticeship**

24. The Open University's Registered Nurse Degree Apprenticeship supports employers to develop their healthcare support workers towards registration with the Nursing and Midwifery Council, as either adult or mental health nurses. As apprentices study flexibly alongside work, they will put their newly acquired knowledge and skills into practice immediately, for the positive benefit of patients and service users. The first person to undertake and complete the Open University Registered Nurse degree apprenticeship in County Durham has recently qualified.

### **Practice Nurse Team development**

#### **General Practice Nursing Resilience bid**

25. The Practice Nurse Links have worked with the Commissioning & Delivery Manager and CCG Primary Care Nurse Leads (Tees & Darlington CCGs) to develop a bid to NHS England to provide resilience training. This bid was successful and will enable 2 nurses per PCN across the 5 CCGs to access resilience training.

#### **Continuing Workforce Development bid**

26. The Practice Nurse Links worked with the Commissioning & Delivery Manager and CCG Primary Care Nurse Leads (Tees & Darlington CCGs) to develop an aligned bid for the 5 CCGs for 2019/20, this bid was successful.

The areas included in the plan are:

**Infection Control Leads Training**

- (a) Learning disabilities
- (b) Treatment Room Skills for Health Care Assistants
- (c) Practice Nurse Pathway
- (d) Cardiovascular Disease, Stroke & Hypertension and Chronic Kidney Disease
- (e) Motivational Interviewing
- (f) Immunisations
- (g) Medical Terminology for non-clinical staff
- (h) Clinical Coding training for non-clinical staff
- (i) Primary Care Masterclass – update

**Bi-monthly Practice Nurse Team meetings**

27. Well established bi-monthly Practice Nurse meetings take place across County Durham with the aim of increasing awareness and sharing of best national, regional and local practice, networking, professional development, engagement with local providers.

**Educational sessions**

28. Practice Nurse Teams across the CCGs have access to the North Durham Protected Learning Time events and DDES Collaborative and Time Out sessions.

**Nurse Development sessions**

29. Two Practice Nurse Team development sessions led by the CCGs Director of Nursing are planned for 2020.

**Identifying and Supporting Vulnerable Practices**

30. In addition to the above the CCGs have developed a Practice Sustainability Tool. The tool is a qualitative method of assessing vulnerability in general practice, the primary reason for this is to provide evidence of sustainability issues.
31. The first section of the tool draws upon information already available through NHS England and Health Education England with a significant amount already being in the public domain. The second voluntary section of the tool is completed by the practice and is overlaid with a series of operational questions that have a bearing on practice resilience. Criteria within the tool are summarised below; however it should be noted these are in process of being refined.

## Practice Sustainability Tool Scoring Criteria

SECTION 1 CCG completion	SECTION 2 General practice completion
<ul style="list-style-type: none"> <li>• CQC rating: inadequate; requires improvement</li> <li>• Primary Care Web Tool: approaching review or review identified</li> <li>• Number of GP Partners and salaried GPs</li> <li>• Number of patients per FTE GP</li> <li>• Number of patients per FTE Advanced Nurse Practitioner</li> <li>• QOF % achievement</li> <li>• Referral or prescribing performance compared to CCG average</li> <li>• GP Patient Survey: Overall, how would you describe your experience of your GP practice? (% Good); ease of getting through by telephone</li> <li>• List closure, including application to close list</li> </ul>	<ul style="list-style-type: none"> <li>• Clinical sessions per week</li> <li>• GP employment</li> <li>• GP retirement plans</li> <li>• GP exit interviews</li> <li>• GP training posts</li> <li>• Individual professional performance issues</li> <li>• Professional isolation</li> <li>• Practice leadership issues</li> <li>• Significant practice changes</li> <li>• Practice branch surgeries</li> <li>• Buildings –fit for purpose</li> </ul>

Some examples of work around practice vulnerability include:

- (a) encouraging practices to share any emerging issues (e.g. staff resource) with their CCG at an early stage so we can work together to provide the right support, as soon as possible
- (b) support around management of workload
- (c) approaching practices assessed as being more resilient, to see if there would be willing to offer support to less resilient practices
- (d) facilitating and establishing a register of GP practices and Federations to share their experience and learning e.g. pre CQC advice and practice improvement; development of significant event process; clinical meeting templates; policies and procedures; practice mergers and leadership; and
- (e) benchmarking the CCG offer of support to general practice, with other CCGs to determine if further actions can be taken to promote sustainability.

## **CQC Support**

32. Following the outcome of CQC ratings of two practices the CCG were approached by both practices who requested some support and guidance this support included:

### **Phoenix Medical Practice**

33. CQC - the practice were rated inadequate (November 2018)
34. Director Lead aligned – Gill Findlay
35. Digital Lead – support practice with hospital correspondence, how it was processed and stored, safety issues highlighted and changes put in place
36. Quality and Development Manager – reviewed processes of significant events and CAS alerts this included identifying a lead the process in the practice for action and dissemination and post learning
37. the CCGs Infection Prevention and Control Team, Practice Nurse Link also visited and supported the practice with actions in relation to their specific areas of expertise. The practice also worked with the Medicines Optimisation Team with regards to prescribing.
38. NECS support (paid through resilience) to undertake mapping of the practice business processes and redesign where appropriate
39. Cancer – Clinical Lead for cancer supported the practice in reviewing how it handles the whole process around cancer patients
40. Action plans implemented
41. Following a subsequent revisit on safety grounds the CQC were satisfied that all remedial actions had been addressed

### **Gardiner Crescent**

42. In August 2018 Gardiner Crescent and the Lavender Centre were rated by the CQC as overall requires improvement following an announced comprehensive inspection. The safe, effective and well-led domains were rated as requires improvement and caring and responsive as good. All population group ratings were rate as requires improvement.
43. Director Lead aligned – Joseph Chandy
44. The Director of Commissioning, Strategy and Delivery (Primary Care), Commissioning and Development Lead and Quality and Development Manager visited the practice in June, July and August 2019 to support the GP Partner, Business Manager and Operations Manager with the development of their CQC action plan and presentation.

45. North Durham CCG Medical Director, the CCGs Infection Prevention and Control Team, Safeguarding Adults and Children Team and Practice Nurse Link also visited and supported the practice with actions in relation to their specific areas of expertise. North Durham CCG GP Clinical Lead for Learning Disabilities had visited the practice previously in 2019 and the practice were also working with the Medicines Optimisation Team with regard to antibiotic prescribing.
46. The CQC carried out an announced comprehensive inspection at Gardiner Crescent Surgery on 22 August 2019 as part of their inspection programme and to check that improvements had been made following the previous inspection . The practice was rated good overall, good for all key question areas and good for all population groups. The CQC found no breaches of regulations but identified 6 actions that the practice should take.

## **Conclusion**

47. As you can see the CCGs support a wide range of initiatives on sustainability and resilience in primary care.
48. From the range of initiatives the GP and Nurse Career Start schemes has been and continues to be the most successful. However the financial initiatives introduced has supported struggling practices through difficult times and provided some stability for those practices going through mergers.
49. Future decisions around workforce resilience will include taking into account primary care networks.

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## **Appendix 1: Implications**

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### **Legal Implications**

None

### **Finance**

The report details CCG forecasted investment in primary care.

### **Consultation**

As part of the primary care strategy delivery the CCGs continue to engage with the local community regarding general practice primary care services through the existing engagement model, which includes Patient Participation Groups (PPGs) and the Patient, Public and Carer Engagement Committee (PPCEC).

### **Equality and Diversity / Public Sector Equality Duty**

CCG primary care strategies are subject to Equality Impact Assessment.

### **Climate Change**

No implications

### **Human Rights**

N/A

### **Crime and Disorder**

N/A

### **Staffing**

CCG primary care strategies take into consideration workforce sustainability.

### **Accommodation**

N/A

### **Risk**

The CCGs hold risk management plans related to specific areas of strategy delivery.

### **Procurement**

N/A