

NHS Rotherham Clinical Commissioning Group

Primary Care Sub Group – 29 January 2020

Primary Care Committee – 12 February 2020

The NHS England GP Retention Scheme

Lead Executive:	Chris Edwards, Chief Officer
Lead Officer:	Rachel Garrison, Senior Contract Manager (Primary Care)
Lead GP:	Dr Avanthi Gunasekera, SCE Lead for Primary Care

Purpose:

To brief the Committee on the current status of the retention scheme, request approval for the proposed budget for 2020/21, and propose two applicants for review.

Background:

The GP Retention Scheme is a package of financial and educational support to help doctors, who might otherwise leave the profession, remain in clinical general practice. The scheme supports both the retained GP (RGP) and the practice employing them by offering financial support in recognition of the fact that this role is different to a 'regular' part-time, salaried GP post, offering greater flexibility and educational support. RGPs may be on the scheme for a maximum of five years with an annual review each year to ensure that the RGP remains in need of the scheme and that the practice is meeting its obligations.

This scheme enables a doctor to remain in clinical practice for a maximum of four clinical sessions (16 hours 40 minutes) per week – 208 sessions per year, which includes protected time for continuing professional development and with educational support. Doctors applying for the scheme must be in good standing with the General Medical Council (GMC) without GMC conditions or undertakings – except those relating solely to health matters. The scheme is not intended for the purpose of supporting a doctor's remediation and where the relevant NHS England Responsible Officer has concerns, the doctor would not usually be eligible for the scheme. The scheme is managed jointly by Health Education England (HEE) through the designated HEE RGP Scheme Lead and NHS England.

(Taken from the GP Retention Scheme Guidance 2019:

<https://www.england.nhs.uk/wp-content/uploads/2019/03/gp-retention-scheme-guidance-v5.pdf>)

The NHS England GP Retention Scheme was last discussed by the Committee in January 2019, at which point the CCG had received two applications and the Committee made the following decisions:

- Offer the scheme to first applicant (JP) for five years providing their HEE annual assessments are satisfactory.
- Advise the second applicant (RB) that if they wish to re-apply in the future, their existing application could be utilised and they would be considered within the

affordability guidelines.

- As the allocation for the following year was known, it was agreed to set a financial allocation for the equivalent of one full applicant or part thereof (i.e. four sessions / £20k) for the 2019/20 year.
- Future applications will be received and determined by affordability and the protocol which had been presented at the meeting (attached in appendix A for information).

Primary Care Delegation Responsibility:

Does this paper relate to Rotherham CCG or delegated business?

Rotherham CCG	
Delegated	✓
Both Rotherham CCG and delegated	

Please indicate which area of delegated responsibility this paper covers:

Commissioning, procurement and management of GMS,PMS and APMS contracts including taking contractual action	
Newly designed enhanced services (including DES)	
Local incentive schemes	
Discretionary payments	
Commissioning urgent care for out of area registered patients	
Planning Primary medical care services (PMCS)	
Managing practices with CQC / quality concerns	
Decisions on premise cost directions	
Planning the commissioning of PMCS	
Manage the delegated allocation for commissioning of PMCS	✓
Assurance to the governing body on the quality and safety of PMCS	

Analysis of key issues and of risks

The first applicant (JP) has now given notice on the scheme and will leave his post in Rotherham on 31 January 2020. The annual review would be due at the end of January, so JP has completed a full year on the scheme.

The second applicant (RB) was on maternity leave in January 2019 so not eligible for the scheme, however has now returned to work at Magna and requested her application be reviewed again. She has applied for the scheme on the basis of working four sessions per week at a cost £19,999.36. Her application can be found in appendix B.

Another application has also been made; RM has been offered a post at The Village Surgery and begins 03 February 2020. Her application is also based on her working four sessions per week at a cost of £19,999.36. Her application can be found in appendix C.

The local protocol dictates that if more than one applicant is eligible under the scheme, applicants will be reviewed by a panel and further prioritised based on the needs of the employing practice at that time e.g. current staffing vacancies and employed clinicians, patient list size and activity levels, access arrangements etc. Whether or not this is necessary will depend on the budget the committee decides to allocate for 2020/21.

Patient, Public and Stakeholder Involvement:

Not applicable.

Equality Impact:

Not applicable.

Financial Implications:

In 2019/20 it was agreed to set a financial allocation for the equivalent of one full applicant or part thereof (i.e. four sessions / £20k).

Both RB and RM have applied to work four sessions at a cost of £19,999.36 each.

Human Resource Implications:

Not applicable.

Procurement Advice:

Not applicable.

Data Protection Impact Assessment:

Not applicable.

Approval history:

None.

Recommendations:

It is recommended the Committee:

1. Set a budget for 2020/21.
2. Depending on the budget, decide if the current two current applicants need to be reviewed by a panel in order to prioritise their applications.
3. As JP is no longer on the scheme, decide if the remainder of the funds for 2019/20 can be utilised in funding the current applicants (one quarter i.e. £5k is remaining).

Paper is for Approval.

Appendix A

Protocol for applications received under the NHS England GP Retention Scheme

1. Introduction

- 1.1 The GP Retention Scheme is a package of financial and educational support to help doctors, who might otherwise leave the profession, remain in clinical general practice.
- 1.2 The scheme supports both the retained GP (RGP) and the practice employing them by offering financial support in recognition of the fact that this role is different to a 'regular' part-time, salaried GP post, offering greater flexibility and educational support. RGPs may be on the scheme for a maximum of five years with an annual review each year to ensure that the RGP remains in need of the scheme and that the practice is meeting its obligations.
- 1.3 This scheme enables a doctor to remain in clinical practice for a maximum of four clinical sessions (16 hours 40 minutes) per week – 208 sessions per year, which includes protected time for continuing professional development and with educational support.
- 1.4 Doctors applying for the scheme must be in good standing with the General Medical Council (GMC) without GMC conditions or undertakings – except those relating solely to health matters. The scheme is not intended for the purpose of supporting a doctor's remediation and where the relevant NHS England Responsible Officer has concerns, the doctor would not usually be eligible for the scheme.
- 1.5 The scheme is managed jointly by Health Education England (HEE) through the designated HEE RGP Scheme Lead and NHS England.

(Taken from the GP Retention Scheme Guidance)

<https://www.england.nhs.uk/wp-content/uploads/2019/03/gp-retention-scheme-guidance-v5.pdf>

2. Eligibility criteria

The scheme is open to doctors who meet ALL of the following criteria: Where a doctor is seriously considering leaving or has left general practice (but is still on the National Medical Performers List) due to:

- a. Personal reasons – such as caring responsibilities for family members (children or adults) or personal health reasons

Or

- b. Approaching retirement

Or

- c. Require greater flexibility in order to undertake other work either within or outside of general practice.

And when a regular part-time role does not meet the doctor's need for flexibility, for example the requirement for short clinics or annualised hours.

And where there is a need for additional educational supervision. For example a newly qualified doctor needing to work 1-4 sessions a week due to caring responsibilities or those working only 1-2 sessions where pro-rata study leave allowance is inadequate.

3. Yorkshire & Humber overarching process

- 3.1 Applications are initially received by HEE, who review to confirm eligibility.
- 3.2 Once confirmed eligible, HEE forwards the application to the NHS England to confirm whether there are any performance concerns.
- 3.3 If no performance concerns, NHS England Medical Team sends the application to the NHS England Primary Care Team.
- 3.4 For fully delegated CCGs, NHS England Primary Care Team forwards the application to the CCG to confirm whether the application is approved.

4. NHS Rotherham Clinical Commissioning Group local process

- 4.1 Final decisions regarding applications to NHS Rotherham Clinical Commissioning Group (CCG) will be made by the Primary Care Committee.
- 4.2 The Primary Care Committee is responsible for ensuring the affordability of the scheme, and on this basis a budget will be decided for each financial year.
- 4.3 All Rotherham GPs will be invited to apply for the sessions available within affordability criteria, via the existing HEE process.
- 4.4 In order to be eligible to apply, the applicant must be currently employed and working within an NHS Rotherham CCG practice.
- 4.5 If more than 1 applicant is eligible under the scheme, applicants will be reviewed by a panel and further prioritised based on the needs of the employing practice at that time e.g. current staffing vacancies and employed clinicians, patient list size and activity levels, access arrangements etc.
- 4.6 The review panel will include the NHS Rotherham CCG GP for Primary Care, a Local Medical Committee (LMC) representative, and a CCG Officer of the Primary Care Team and the panel will then make a recommendation to the Primary Care Committee.

- 4.7 The successful applicant/s will be given funding for 5 years, subject to the annual review process applied by HEE.
- 4.8 The successful applicant/s will be formally offered a place on the scheme, via HEE, subject to the local terms above.
- 4.9 Should the successful applicant/s withdraw from the scheme, either at the point of offer or in-year, an offer will be made to the applicant next prioritised.