

Appendix B – RB Application

PART B: SCHEME APPLICATION

ELIGIBILITY FOR SCHEME:

- a. Please give a detailed explanation for your application, reasons why you are considering leaving or have left general practice, why a regular part time role wouldn't suffice and what additional educational support that you need.
- b. Where appropriate, supporting evidence should be included, e.g. letter of resignation, appraisal documents, medical evidence, statement of intent to leave, evidence of accessing pension etc. These will be treated as confidential documents and held securely.

I moved to Yorkshire area after marriage 2 years ago and after a short episode of locum work took maternity leave. My son is now 1 years old and has quite a few food allergies and eczema. I have tried doing a few locum jobs but due to their nature they are often advertised last minute and hard to work around with a 1 year old child. I have no family in Yorkshire and can only work on the days that my husband is free which is Tuesday and Friday. I have been finding that I am doing fewer and fewer sessions and a retention GP post would be ideal to give me the flexibility with work I need.

I have worked at Magna group before and am aware of other Doctors that have been on the retainer scheme there; I feel that the work load at Magna and the team there would be able to accommodate my work requirements.

Please list any attachments below to support your application. These will be treated as confidential documents and held securely.



PART C: WORK AND EDUCATIONAL ARRANGEMENTS

1. What will your normal work pattern be? Please use the job plan below. Example job plans are provided within annex 2 of the GP Retention Scheme guidance.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Practice site (should	OFF	Valley Health	N/A	N/A	Thrybergh AM	N/A	N/A
normally only be one)		Centre (VHC)			VHC PM		
Start time		9.30am			9.30am		
Finish time		5pm or 6pm (on- call, phones divert to OOH)			5pm		
AM surgery: Number of appointments, time of first and last appointment		Appointments from 10am- 12.20pm with 2 blocks			Appointments from 9.30am- 11.50pm with 2 blocks		
PM surgery: Number of appointments, time of first and last appointment		2-3.50pm with 1 block			1.30-3.20pm with 1 block		
Visit(s)		1 + additional visit if on-call			1 max		
Time for admin		1 hr (9.30-10am & 30min after pm surgery)			1hr (3.30- 4.30pm)		
Meetings – title, start and finish times		None	1-3pm once per month	PLTC or CPD 1- 4pm (monthly)	None		
Mentoring time slot		~4.30-5pm (30mins)			4.30-5pm		
Hours worked this day		7.5hr or 8.5hr (on-call) = 8 hours average	0.25 average	0.75 average	7hr and 30mins		
Comments: Ad hoc adjustments to allow for non weekly meetings or		On-call every 2 weeks (=6pm finish). Lunch 30mins – between			Lunch 30mins between am and pm surgery		
time in lieu for late finishes/extended		AM and PM surgery					



hours



tart and finish time, day of week	10-6pm, every other Tuesday (on call for 2 / 4 sites ~ 7.5k patients)
requency (number per year)	24
extends normal day length, arrangements for time in lieu	Doesn't extend normal day length

2.	Other clinical and non-clinical work
	Please give details if applicable, to include number of hours per week. Please see GP Retention Scheme guidance for examples or work that can be undertaken.
None	



3. CPD plan for the year

Please give details of arrangements for your CPD within the practice. Example CPD plans are provided within annex 2 of the GP Retention Scheme guidance.

You will be required to produce a CPD plan for the first year, within 6 weeks of your start date; the plan should be discussed with your Educational Supervisor and submitted to your local designated HEE RGP Scheme Lead.

ACTIVITY	In house education meetings: describe frequency, duration and purpose	Formal courses or protected learning events occurring on contracted retainer days	Practice development work where aligned to PDP goals and NHS appraisal	Time out of practice for self directed learning or time in lieu for CPD carried out outside of contract time where aligned to NHS appraisal PDP goals	Total
Details	In house PLT and practice clinical meetings – 2 hours / month at least	CCG wide PLTC events – every 2 months (3 hours / Thu PM). GP update course (6 hours)	Mandatory online training – safeguarding, IG, infection control, prevent		
Hours / year	24	24	8	24	
Sessions / year approx.	6	6	2	6	20

To be completed by the Educational Supervisor - How will you support the RGP in carrying out practice development work? (e.g. IT training, admin support, etc) Full IT induction / refresher to be provided by data management team (DMT) and ES. DMT will help Rumi to carry out audits / searches etc.

To be completed by the Educational Supervisor - What are the arrangements for booking CPD time at the practice for all the above categories?

Rumi to directly liaise with practice manager to book off sessions for attendance to all above. Discuss with ES re any time off for CPD / appraisals / courses / study leave before booking time off. Rumi to give 6 weeks minimum notice.



4. Career plans
Please describe your career intentions for the future
Firstly to remain in GP for as long as I can balance my home and work life.
I would like to go into teaching medical students, Registrars etc and Magna Group are able to facilitate this
The duration of the scheme is for a maximum of 5 years unless an extension is given (see GP Retention Scheme guidance handbook)



PART D: PRACTICE DETAILS FOR COMPLETION BY THE EDUCATIONAL SUPERVISOR

Proposed start date	1.7.18	Number of sessions per week	4 sessions / week		
	Total period of participation o	on the scheme is 5 years u	nless an extension is given (see	GP Retention Scheme guidance handbook)	
Name of educational supervisor	Dr Ripon Ahmed Please describe the relevant experience that the educational supervisor has for this role. GP trainer since 2014 and ES for GP trainees since 2016. Honorary clinical lecturer (Sheffield).				
Practice address	Magna Group Practice, Valley H	lealth Centre, Saville Street,	Rotherham, S65 3HD		
Practice code	C87006		Practice type GMS/PMS/APMS	PMS	
Practice telephone	01709 851414		Practice list size	13500	
Name of practice manager	Cheryl Ramsey				
Email for practice manager	Cheryl.Ramsey@gp-c87019.nhs	s.uk			
Telephone for educational supervisor	01709851414 / 07931761602				
Email for educational supervisor	ripon_ahmed@hotmail.com				



Clinical staff at practice	· · · · · · · · · · · · · · · · · · ·
Number of GPs	Partner(s) 5 Salaried 4
Number of clinical sessions offered by practice GPs over a week in total	Partner(s) 32 Salaried 32
Specialist roles and outside interests of GPs working at the practice	Minor surgery, medical student teaching, GP training / education, contraception / implanon insertion, cardiology GPwSI
Number of practice nurses	5
Number and type of allied health professionals	5 (4 x HCA, 1 physiotherapist providing 1 day per week)
Number and type of learners the practice is approved to have in place at any one time (if applicable)	1 GP trainee, 1 medical student (phase 3a/b)

2. If the RGP is to work at more than one site please list them below (i.e. a branch surgery, night shelter nursing home, other sites etc.), please also state the supervision available.

Designation (type)	Address and contact telephone	Supervision / support available
Branch surgery	Thrybergh Medical Centre, 21 Park Lane, Rotherham, S65 4BT. 01709 853873	Telephone support from ES

3. What induction is planned (or has already taken place) for the RGP within the practice?

Rumi has done a couple of locum sessions at the practice to test the water. On formally starting on the scheme, we will devise a brief induction timetable (as per her learning needs) with sessions on QOF, data entry / read coding, local procedures / policies / guidelines. There will be protected time given to do all mandatory online training (information governance, infection control, safeguarding levels 1-3).



PART E: ANNUAL REVIEW FOR COMPLETION BY THE RGP AND EDUCATIONAL SUPERVISOR

Please tick the appropriate box:	This section is not applicable as it is an initial application form	Year 1 annual review		Year 2 annual review		Year 3 annual review		Year 4 annual review	
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1.	Please describe your educational supervision arrangements and how well they have worked over the year.
2.	You will be having annual appraisals but it would be useful to know how much of your CPD allowance you have taken this year and how it has been used?
3.	Have you worked regularly in excess of your contracted hours at the practice? If yes please explain the factors contributing to this and outline any proposed changes in the job plan for the following year to address this.
4.	Please state any additional support needed?



How many weekly sess	siana will the	not comprise of /4	11.				
now many weekly sess	sions will the po	ost comprise of (1-2	i):				
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Practice site (should							_
normally only be one)							
Start time							
Finish time							
rinish time							
AM surgery:							
Number of							
appointments, time of							
first and last							
appointment							
PM surgery:							
Number of							
appointments, time of							
first and last							
appointment							
Visit(s)							
11011(0)							
Time for admin							
Meetings – title, start							
and finish times							
Mentoring time slot							
_							
Hours worked this							
day							
Comments:							
Ad hoc adjustments							
to allow for non							
weekly meetings or							
time in lieu for late							
finishes/extended							
hours							



ON CALL DUTIES - using contracted time as RGP in the practice	
Start and finish time, day of week	
Frequency (number per year)	
If extends normal day length, arrangements for time in lieu	
6. Other clinical and non-clinical work	
	ek. Please see GP Retention Scheme guidance for examples or work that can be
undertaken.	R. Flease see GF Retention Scheme guidance for examples of work that can be



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Please give details of arrangements for your CPD within the practice.

ACTIVITY	In house education meetings: describe frequency, duration and purpose	Formal courses or protected learning events occurring on contracted retainer days	Practice development work where aligned to PDP goals and NHS appraisal	Time out of practice for self-directed learning or time in lieu for CPD carried out outside of contract time where aligned to NHS appraisal PDP goals	Total
Details					
Hours / year					
Sessions / year approx.					

To be completed by the Educational Supervisor - How will you support the RGP in carrying out practice development work? (e.g. IT training, admin support, etc)

To be completed by the Educational Supervisor - What are the arrangements for booking CPD time at the practice for all the above categories?



TO BE COMPLETED BY THE EDUCATIONAL SUPERVISOR

1.	Please comment on how CPD arrangements have worked for this year, if there have been any changes in practice circumstances and how these will impact on arrangements for next year.
2.	Please describe any personal development done this year in connection with your educational supervisor role.
3.	Is there any additional support needed from the designated HEE RGP Scheme Lead?

PLEASE COMPLETE SECTIONS F, G AND H.



PART F: FOR COMPLETION BY THE RGP AND EDUCATIONAL SUPERVISOR

	n given in this form is accurate and is in line with the criteria of the GP Retention Scheme and t d for the purposes of approving the application and monitoring the scheme.	hat information	on contained in this form will		
Name of prospective RGP	Rumi Begum				
Signature of prospective RGP	R Begum	Date	16.4.18		
Name of Educational Supervisor	Ripon Ahmed				
Signature of Educational Supervisor	R Ahmed	Date	16.4.18		
Please comment on how you (the educational supervisor) plan to supervise the RGP.					
Variety of methods – weekly educational supervision (debriefs / catch up / RCA / case discussions). Telephone support / advice as required. Using SystmOne tasks to provide advice / guidance / help.					
I confirm that I am aware that the doctor employed by the practice under the GP Retention Scheme 2017 retains full employment rights as an employee of the practice when the scheme ends at 5 years under UK Employment Law					
Name of authorising employer (e.g. Practice Manager)	Cheryl Ramsey				
Signature of authorising employer (e.g. Practice Manager)	C Ramsey	Date	16.4.18		



PART G: RECOMMENDATION TO BE COMPLETED BY THE DESIGNATED HEE RGP SCHEME LEAD

Please send this form to your designated HEE RGP Scheme Lead attaching a brief CV and any supplementary information.

Name of designated HEE RGP Scheme Lead reviewing application	Dr Gareth Harrison	
Date of recommendation	21/6/2018	
Recommendation (initial application)	Recommend for GP Retention Scheme	YES
	Do not recommend for GP Retention Scheme	
Recommendation (annual review)	RGP to continue on the GP Retention scheme for another year	
	RGP to discontinue on the GP Retention scheme	
Reasons for recommendation (based on criteria set out within the GP Retention Scheme guidance handbook)	DR SCHEME TO ALLOW HER TO WORK ON THE DARESPONSIBILITIES. BEING RELATIVELY NEW TO TH	ILY SUPPORT LOCALLY. HER HUSBAND WORKS 3 DAYS A WEEK AND SHE NEEDS THE RETAINED AYS WHEN HER HUSBAND IS NOT AT WORK AND TO ENABLE HER TO FULFIL HER CHILDCARE IE AREA AND RETURNING FROM MATERNITY LEAVE SHE WILL BENEFIT FROM THE EDUCATIONAL TITLEMENT WHICH WILL HELP HER KEEP UPTO DATE.
Signature of the designated HEE RGP Scheme Lead	Dr Gareth Harrison	

When Sections A – F have been completed, please send this form to the NHS England local office Director of Commissioning Operations (DCO) (or nominated deputy either within NHS England or delegated CCG) to make the final decision on whether the doctor can join the GP Retention Scheme



PART H: FOR COMPLETION BY NHS ENGLAND LOCAL TEAM DCO (OR NOMINATED DEPUTY EITHER WITHIN NHS ENGLAND OR DELEGATED CCG)

Name of NHS England DCO (or nominated deputy either within NHS England or delegated CCG)	Rachel Garrison, on beha	lf of the NHS Rotherh	nam CCG Primary Care Committee
Date of decision	18th July 2018 (date of Pi	rimary Care Committe	ee
Decision	Agreed		
	Declined	Yes	
Reasons for decision (based on the eligibility criteria to join the scheme, whether there is sufficient budget available through the primary care allocation and that there are no concerns with the doctor or practice)	was unsuitable for the ca regarding workforce at th future primary care alloca are happy to encourage a as they felt they did not r the Federation to look at for a Rotherham Scheme	ndidate as there are sais practice, and the interiors are unknown. Applicants. The Commet the criteria of the overall issues on how	ct the application didn't make clear why a regular part-time post such posts available in Rotherham, that there were no concerns nability of the Committee to commit to a five year scheme when In principle the Committee support the GP retention scheme and nittee did not approve the applications submitted on this occasion he scheme. The Committee would like to encourage RCCG, LMC and w to retain staff and asked organisations to send in their proposals
Where an application to join the scheme is unsuccessful, before the decision is communicated back to the doctor the NHS England DCO (or nominated deputy either within NHS England or delegated CCG) is to peer review the application with a neighboring NHS England DCO (or nominated deputy either within NHS England or delegated CCG). A final decision in then to be made to whether the doctor can join the scheme. The NHS England central team must be informed on any applications being peer reviewed by copying the application and final decision to england.primarycareworkforce@nhs.net.	nominated deputy e England or dele revie Agree wit	England DCO (or either within NHS gated CCG) peer wing application h initial decision	
Proposed date funding to commence			
Signature of NHS England DCO (or nominated deputy either within NHS England or delegated CCG)			



Once approved NHS England DCO (or nominated deputy either within NHS England or delegated CCG) to notify the designated HEE RGP Scheme Lead of the decision. If successful the relevant NHS England finance lead / contract manager will need to be notified to inform Primary Care Support (PCS) England of the practice that will be hosting the RGP.

The RGP may not commence in post until approval has been confirmed by the NHS England DCO (or nominated deputy either within NHS England or delegated CCG) and the Practice has been notified in writing.

FOR MONITORING PURPOSES ONLY (TO BE COMPLETED BY THE RGP)

Please tick whether you are a principal, salaried GP, locum or currently on a career break			
Principal			
Salaried GP			
Locum			
Currently on a career break			
Other			
Please state your age (in years)			