

Department of Primary & Community Care Education

Working across Kent, Surrey & Sussex

Review 2015



Developing people
for health and
healthcare

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Introduction

Welcome to the 2015 review of postgraduate primary care education for Health Education England, working across Kent, Surrey and Sussex.

This report highlights the achievements of the postgraduate primary care department over the past year, in relation to our main purpose: to support the recruitment and retention of doctors in general practice in order that high quality patient care is delivered in primary care settings across Kent, Surrey and Sussex.

As part of Health Education England (HEE), our activities are driven by a mandate, which sets out priorities for our functions. The 2015 mandate set out priorities including:

- Developing maternity and children services
- Delivering integrated care, including supporting the health of military veterans
- Mental health, including a specific focus on dementia
- Public health
- Recruiting a workforce with the right values for the NHS

For general practice specialty training this has led to a focus on the opportunities afforded to trainees to embrace inter-professional working and learning, and high quality team-based care for our patients.

In addition to the mandate, 2015 also saw the publication of the [ten point plan](#) for general practice, which sets out actions required to expand and strengthen GP recruitment. For Kent, Surrey and Sussex, this has meant working to implement the establishment of the community education provider networks (CEPNs) in the region to support the delivery of joined up training for primary care staff. You can read more about our work in this area later on in this review.

This year has seen us working more closely with our colleagues in HEE's London health education teams and we are working towards fully integrating the postgraduate medical training and quality functions to reflect this closer relationship, with the aim of providing an improved service for trainees across the region.

We continue to engage with service providers about all aspects of our work through our county workforce summits, other alliances such as the urgent care networks, as well as working closely with universities and all other stakeholders. I'd like to thank all of our stakeholders for their on-going support.

Professor Hilary Diack
Head of Primary and Community Care Education
March 2016

Department Overview

The department of primary care is structured in such a way as to support the recruitment and training of doctors wishing to become general practitioners, retain and help develop the current GP workforce and develop the wider primary care workforce. This has been through two virtual schools: the Pre-Certification and Post-Certification GP schools and the primary care programme board. Some achievements from both schools and the board are highlighted below.

Pre-certification GP specialty school:

- 98% recruitment to declared posts for GP specialty training for August 2015 entry: although there were a few late withdrawals. Despite a reduction in overall recruitment to GP specialty training, Kent, Surrey and Sussex was one of the highest recruiting areas in the UK.
- Reduction in unsatisfactory outcomes requiring extensions to training at the Annual Review of Competency Progression panels.
- Well established contractual support for trainees through the Single Employer, now in its fifth year, providing continuity of employment to trainees and supporting GP practices who host rather than directly employ trainees (except those connected to the Epsom programme).
- A further cohort of enhanced ST3 GP trainees. The scheme provides opportunities for high-flying trainees during an additional three months of training to develop their skills beyond those required for a Certificate of Completion of training.
- Establishment of a specialty training committee to bring together GP trainees, educators and the administration team to review all aspects of specialty training.
- A highly actualised GP specialty training committee which spearheaded a significant investigation into provision of GP specific educational programmes in ST1 and ST2, which has led to access to GP specialty training being mandated across trusts.
- Our fourth cohort of educators (24) successfully completed a Postgraduate Certificate in Strategic Leadership and Medical Education through the University of Kent. We have

continued our highly successful collaboration with Kent University moving to the Centre for Professional Practice and developing our programme to make it multi-professional. A second cohort of students, from our GP supervisor network, is preparing to undertake a diploma in strategic leadership and multi-professional education in healthcare and we are also supporting a cohort of 7 GPs in undertaking their Masters dissertation.

Post-certification GP school

- Support for the annual NHS appraisal process through providing opportunities for all NHS appraisers across Kent, Surrey and Sussex to continue to develop their skills by attendance at the Appraiser Development Centre.
- On-going support to sessional doctors through 26 peer learning sets.
- Development of a local Induction and refresher scheme following the national revision of the scheme in March 2015.
- Development of post certification transition support groups (PCTSGs) to support newly qualified GPs and practice nurses.
- Development of the commissioning associate dean role to support GP tutors and to work with patch associate GP deans an integrated approach to the education of the pre-CTT, GP and primary care workforce.
- Continued local support for the doctor retainer scheme.

Primary Care Programme Board

- The Memorandum of Agreement between CCGs and the Kent, Surrey and Sussex health education team has continued to encourage the development of sustainable robust CEPNs, and a number of nascent CEPNs are poised to advance their development in 2016 by becoming functioning organisations. The network of primary care tutors have continued to demonstrate their commitment and leadership and worked collaboratively to share expertise and best practice.
- Successful CEPN conference in June 2015 where progress on development of CEPNs was shared.
- Continuing to build the practice nurse mentor network to support undergraduate placements through four universities (Canterbury Christ Church, Greenwich, Brighton, and Surrey).

- Completed roll out of the GP workforce tool, with the support of CCGs and the LMC, and 86% of practices are imputing data and can in consequence analyse and compare their workforce data.
- The Primary Care Academic Unit in the University of Kent with a professorial chair is delivering an intercalated BSc for medical students in management in primary care, with the aim of attracting medical students to the county of Kent.
- A diverse programme of work to support the development of the primary care workforce working with the Kent, Surrey and Sussex pharmacy department, SECAMB and in collaboration with four HEIs: Canterbury Christchurch, University of Kent, BSMS, Surrey University and Surrey and Sussex Healthcare NHS trust through a programme board; there is now a Diploma for Physician Associates with the first cohort of students embarking on their two year degree from April 2016.

Education in the Primary Care Department

Probably the greatest asset of the department is its committed workforce of associate GP deans, general practice tutors, GP programme directors, primary care Workforce tutors educational supervisors (GP trainers) and clinical supervisors, without whose hard work none of our proposals and initiatives would have been achieved. It is evident that GP specialty training programmes are thriving and we remain a popular organisation in which to undertake training: whilst having to participate in round 1 re-advert for recruitment to GP specialty training for August 2015, we did not need to enter the second round due to the high uptake of programmes.

The primary care department has also continued to contribute to funding some administrative support at the local level to enable the effective delivery of our GP specialty training and GP professional development. We continue to work closely with the medical education managers and GP local faculty group administrators in the trusts to deliver support to trainees and local programme director and supervisors.

GP educational supervisors are required to be registered with the GMC and we have worked closely with the GMC to ensure efficient and accurate data transfer so this list may be maintained. We have also mapped the GMC Educator Framework to our GP Educator programme to ensure that educators are able to demonstrate their competencies and skills against this framework.

We are fortunate to have several universities in close proximity to us (Kent, Surrey, Brighton, Greenwich, Canterbury Christ Church, and London South Bank). We have a well established

GP education pathway programme for GP trainers that has been now been developed to reflect a multi-professional approach and this has been accredited by the University of Kent. This enhances the ability for our GP trainers to follow their academic aspirations in the form of further degrees, such as an MSc in Strategic Leadership and Multi-professional Education in Healthcare. It remains a requirement for all new GP trainers (educational

supervisors) in Kent, Surrey and Sussex to achieve the Postgraduate Certificate. The department has continued to work with the University of Kent to quality control academic processes through the board of study. We have received positive feedback from both new trainers and existing trainers on the PG Certificate. Our fourth exam board was held in 2015 and we were gratified at the positive comments received from our external examiner about the PG Certificate together with some helpful suggestions to further develop.

We are delighted that a total of 181 trainers have now successfully passed the Postgraduate Certificate in Strategic Leadership and Medical Education (PG Cert) and a fifth cohort of students have started the PG Cert. A second cohort, eight of our network are preparing to commence the PG Diploma and a further seven will hopefully complete the MSc in 2016.

Our aim is to offer all members of our education network the opportunity to gain appropriate further academic qualifications as well as enhancing their development as teachers.

GP Specialty School report

Overview of GP specialty training

The GP curriculum now forms part of the living established experience for both trainees and supervisors and we are now seeing the more accredited GP trainers coming through who undertook their own training based in the current system and have experienced obtaining the MRCGP first hand.

The GP curriculum continues to be reviewed to reflect the skills and competencies required of the GP in the NHSA. A significant change in 2015 has been the introduction of Clinical Examination and Procedural Skills (CEPS), which replaces Direct Observation of Procedural Skills (DOPS). Rather than a tick box list of eight mandatory skills, trainees will be assessed on their abilities across the spectrum of clinical examination, including intimate examinations and how they incorporate these examinations into the consultation.

Integrated training placements

The GP school has continued to provide a large number of integrated training placements. These provide a base in general practice with the opportunity of up to two days a week in another secondary care specialty, thus providing access to the breadth of clinical medicine. We continue to review the provision of these placements specifically with respect to how trainees gain experience in psychiatry and paediatrics to support the HEE Mandate.

We have also continued with our innovative placements in CCGs and this opportunity is now available in all three counties. This continues to be successful and doctors who have gone through this consistently report the value of the process. Comments from trainees suggest these placements have been a reason trainees sought to be appointed within Kent, Surrey and Sussex.

Single employment contract for GP trainees (SEAT)

The arrangement is now in its fifth year. From August 2015 the majority of GP specialty trainees are employed by the acute trusts: an exception being those doctors who entered training before August 2011 and doctors on the Epsom GP training programme whose acute trust is in south London. We are working closely with Epsom Trust who is interested in employing GP trainees under this arrangement from August 2016.

We continue to work closely with the trusts' medical staffing departments, through the SEAT and Medical Education Managers forums. We are pleased that there has been increasing sharing of knowledge and processes as SEAT leads have supported education events for practice managers.

As a result of the contract set up in 2013, we continue to commission medical indemnity cover for GP trainees employed by the single employer (SEAT) contract in their GP placements. As part of the package an educational resource has been made available to programme directors to support learning on the VTS programme and at our graduation event.

Out of hours (OOH) placements for GP trainees

The school is pleased to report that working relationships between the GP School and out of hours providers are robust. There is excellent dialogue between the school and the providers, supported by twice yearly meetings that now include representation from the GPStR (trainees) sub-committee. There are also firm local arrangements in place with lead programme directors liaising with their local provider. A round of quality management visits to providers with a visiting team from the School that will include trainee representation is planned.

School structure

The pre-certification GP school structure has changed this year with the development of the Specialty Training Committee (STC). This quarterly forum brings together educators,

trainees and the administrative teams with lay and the Royal College of General Practice representation to consider all aspects of GP specialty training: the inaugural meeting was in December 2015 and feedback was extremely positive with the forum being seen as a vehicle to disseminate good practice and problem solve on areas of concern. The development of the Specialty Training Committee aligns GP school processes with our colleagues in specialty.

There has been no operational merging of trusts this year, but it is likely that the continuing process of acute NHS trust hospital reorganisations will require us to review some of the GP training programme organisation in the future. There has been a formal merging of some of the GP training programmes to align with trust mergers that have previously taken place.

Programme areas

East Kent patch

East Kent includes the main hospital sites of Ashford, Canterbury and Margate, which are all part of the NHS University Trust. Medway, for organisational purposes, is supported by the patch associate GP Dean for East Kent.

West Kent patch

Maidstone and Tunbridge Wells are working towards a shared training programme as they share a common NHS trust.

The Dartford training programme is linked to the Darent Valley NHS Acute Trust.

East Sussex patch

Hastings and Eastbourne are now a common trust and our programme directors have integrated the two programmes into the East Sussex GP training programme.

Brighton and Mid-Sussex training programme area is based in two main hospitals, one in Brighton and the other in Haywards Heath, and both are covered by the same NHS acute hospital trust.

West Sussex patch

Worthing and Chichester are now a shared training programme as they share a common NHS trust: Western Sussex NHS Hospitals Trust.

East Surrey patch

Crawley and East Surrey (CRESH) is one training programme. The CRESH programme links to Surrey and Sussex Healthcare NHS Trust.

Epsom training programme has hospital posts linked to the present Epsom and St. Helier NHS Trust which falls under the Health Education England South London patch.

West Surrey patch

Frimley is a training programme linked with the NHS foundation trust of the same name.

Guildford training programme is linked to the Royal Surrey County Hospital NHS Trust and

Chertsey training programme is linked to Ashford and St Peter's Hospitals NHS Trust.

Each patch is supported by a patch associate GP dean, who is a member of the department of primary care.

Each GP training programme has its own local faculty group (LFG), which is part of the educational governance structure and links to the local academic board (LAB) within the trust. This allows representation and input from each of the specialties that provide training placements for GP trainees, and also the associated local education providers (LEP) which include all the acute NHS trusts with their associated hospital sites, NHS community and psychiatric trusts, NHS clinics (such as genito urinary medicine clinics), hospices, GP out of hours provider sites, and of course, all the approved GP training practices - nearly 250 locations.

GP specialty programme directors' sessions

Kent	No. of Sessions	Surrey	No. Sessions	Sussex	No. Sessions
Eastern & Coastal Kent (Ashford & Dover, Canterbury & Thanet)	12	Crawley	4	Brighton	6
Medway	6	East Surrey	6	Mid Sussex	6
Dartford	6	Epsom	6	East Sussex (Eastbourne, Hastings)	10
Maidstone	6	Chertsey	6	Chichester	6
Tunbridge Wells	6	Frimley	6	Worthing	6
		Guildford	6		

Number of approved GP training practices in Kent, Surrey and Sussex

Approved GP training Practices in Kent, Surrey and Sussex as at December 2015					
East Kent	44	East Surrey	35	East Sussex	42
West Kent	44	West Surrey	50	West Sussex	44
TOTAL	88		85		86
OVERALL TOTAL			259		

ST1/2 Local Education Providers

No.	Unit
1	Ashford and St. Peters Hospitals NHS Trust
2	Brighton & Sussex University Hospitals NHS Trust
3	Dartford and Gravesham NHS Trust
4	East Kent Hospitals University NHS Trust
5	East Sussex Healthcare NHS Trust
6	Epsom & St. Helier University Hospitals NHS Trust
7	Frimley Park Hospital NHS Foundation Trust
8	Maidstone & Tunbridge Wells NHS Trust
9	Medway NHS Foundation Trust
10	Surrey and Sussex Healthcare NHS Trust
11	Royal Surrey County Hospital NHS Trust
13	Western Sussex Hospitals Foundation NHS Trust
14	Kent and Medway NHS and Social Care Partnership Trust
15	Surrey & Borders Partnership NHS Foundation Trust
16	Sussex Partnership NHS Foundation Trust

Recruitment and selection of doctors for GP training

Recruitment to GP training in 2015 allowed us to consolidate and enhance our delivery of the national processes. We were able to recruit to 243 programmes. Whilst 247 programmes were advertised we did not enter the second recruitment round due to late withdrawals and the need to meet existing trainee placement requirements.

The Academic Clinical Fellowship (ACF) in general practice is a four year specialty training post that incorporates 75% clinical training and 25% research and educational training. Three GP ACF trainees completed their training and gained their CCT in August 2014. The GP school appointed two new trainees to ACF programmes which started in August 2014.

Recruitment to GP specialty training programmes commencing in August 2015

	Round 1
Applications 1 st choice deanery	300
Shortlisted for selection centre	378
Offers	247 (234 accepted)

Numbers of trainees in Kent, Surrey and Sussex managed by the GP school

The table below shows the number of trainees in post in January 2016:

Trainees	ST1	ST2	ST3	BBT	TOTAL
Trainees in post	250	237	263	15	765
Trainees not in post (maternity/long term sick, etc)					70
Overall total					835

Trainee progression and outcomes of GP training

With the support of Dr Susan Bodgener, the associate GP dean for curriculum and assessment, the trainees' understanding of workplace based assessment, and how this is supported by the e-Portfolio, has increased year on year. The GP school has been pleased to see an improvement in the quality of reflective log entries in the e-Portfolios. The improvements noted above have been underpinned by a range of support

mechanisms for trainees and through 2015 the GP school has continued to commission and facilitate these resources including:

- Standardised induction providing information on the requirements of GP specialty training.
- GP Specific educational programmes for ST3s and for ST1s and ST2s during their hospital placements. The provision of ST1 and ST2 GP orientated training was greatly enhanced following the GP STR subcommittee's survey which has led to mandated training in trusts.
- Study days in GP – to support the development of the relationship between the trainee and their educational supervisor.
- Applied Knowledge Test courses, twice annually.
- Consultation Skills Assessment (CSA) courses delivered both locally and Kent, Surrey and Sussex wide supported by CSA examiners and our team of simulators.

Services available to all trainees in Kent, Surrey and Sussex also include: access to experienced careers counsellors and the practitioner health programme. The GP school has also commissioned access to GP mentors for doctors adversely affected by exam failure.

The overall performance of Kent, Surrey and Sussex GP specialty trainees in the AKT (Applied Knowledge Test) and CSA continues to be high, which continues to demonstrate the value of the support processes commissioned for our programme directors, GP trainers and the GPStRs. The school was particularly pleased that success in the CSA examination for trainees reaching the end of their three years of training showed further improvement in 2015, with a further reduction in the number of extensions required to support trainees who were unsuccessful.

Trainee support group

Trainee progression through training is closely monitored with the intention of identifying those trainees who may for a variety of reasons require additional support. Processes include the regular reviews undertaken by educational supervisors and review of trainees at the local faculty group. Local interventions may be implemented with the signposting of educational and other resources. trainees with more complex needs may be referred for discussion between programme directors, patch associate GP deans and the head of the

GP school. The Kent, Surrey and Sussex wide trainee support group also meets monthly as a reference group to advise on educational interventions for trainees with complex needs.

MRCGP assessments and Annual Review of Competency Progression outcomes

CLINICAL SKILLS ASSESSMENT

	Jan 2015	Feb 2015	March 2015
Total no. of trainees who took the CSA	58	28	74
Passes	44	21	53
Fails	14	7	21

	April 2015	May 2015	Nov 2015	Dec 2015
Total no. of trainees who took the CSA	32	57	25	29
Passes	24	30	15	21
Fails	8	27	10	8

APPLIED KNOWLEDGE TEST

	JAN 2015	APRIL 2015	OCT 2015
Total number of trainees who took the AKT	77	115	100
Passes	58	80	70
Fails	19	35	30

ARCP Outcomes (1st August 2014 to 31st July 2015)

OUTCOMES	1	2	3	4	5	6	8
Total number of outcomes	533	17	36	26	5	193	89

Key:

- Outcome 1 (satisfactory – continue to next training year)
- Outcome 2 (unsatisfactory – no additional training time required)
- Outcome 3 (unsatisfactory - additional training time required)
- Outcome 4 (released from programme)
- Outcome 5 (incomplete evidence presented - additional training time may be required)
- Outcome 6 (proceed to CCT)
- Outcome 8 (out of programme)

Enhanced ST3 programme

The GP school has developed further the enhanced ST3 programme which commenced as a pilot in 2013. This included enhancement to the existing ST3 year with the aim of

increasing the breadth of learning opportunities, particularly aimed at providing an additional 20 days of targeted study leave. The scheme also affords the opportunity for trainees to develop leadership skills, enhance the sustainability agenda and develop their skills as educators. Ten trainees completed the Scheme in 2015. For 2016 we have developed this programme further, based on trainee feedback and are piloting a formal programme to assist trainees in developing quality improvement projects based on the successful CLIC programme developed in East Kent.

Broad Based Training

We have expanded the number of programmes available for Broad Based Training (BBT) from 12 to 16 for the August 2015 entry and recruited to 15 programmes with placements based in Brighton, Dartford, East Surrey and Frimley. The programme was developed to support the training of doctors better able to work in an integrated way, manage patients holistically who have with complex needs and co-morbidities and have a wider perspective of how health care provision is provided. Trainees experience six-month rotations in general practice, paediatrics, core medicine and psychiatry before exiting into their preferred specialty from the list above.

The BBT programme will not be recruited to nationally from 2016 in order to support the widest possible take up of GP specialty training.

Broadening foundation training programme

The HEE Mandate aspires to 50% of doctors emerging from the foundation programme to enter GP specialty training to help meet proposed targets for GP numbers. From August 2015, 80% of foundation doctors are expected to have a community placement for one of their four-month rotations, rising to 100% by 2017. The GP School has been working with the South Thames Foundation School to help support more placements in GP and 10 new rotations have been added to the foundation programme to support this.

Quality Management

Quality management of the clinical learning environment continues to be a key responsibility for us and encompasses the processes through which we ensure that the

training our learners are receiving from local education providers (LEPs) and higher education providers (HEIs) meets regulatory and local standards.

A process for visiting GP LEPs has continued in 2015 with decisions being informed by our reporting processes, GMC National Training Survey data and external sources of information such as CQC and the National Staff Survey.

For visits to GP, the GP school co-ordinates the visit with programme directors supported by patch associate GP deans, practice managers and GP trainees and the visit is hosted by a GP training practice. The GP school has been pleased by the quality of training as evidenced by feedback from GP trainees, educational supervisors and programme directors.

The GP school also supports visits to acute trust LEPs where GP training takes place so that we may gather feedback on the delivery of the GP curriculum in other specialties and the experience GP trainees have in these departments.

We carried out our first multi-professional visit to the maternity department of the East Sussex NHS Healthcare Trust on 11 September 2015. The aim of this pilot visit was to help the trust ensure that the development of integrated care services for patients is supported by a similar approach to education and training and met with all learners in the department in a visit co-chaired by joint leads from the school of obstetrics and gynaecology and an HEI rep responsible for midwifery student placements.

The GMC undertook a review of our training provision in 2015. Whilst general practice was not specifically visited, our trainees rotate through medicine and Emergency Medicine in large numbers and foundation training includes four month placements in general practice. The GMC also reviewed our quality processes with a visit to the central team. The overall assessment of our training included a few recommendations, including identification of improvements in our processes such as EDQUINS that have supported initiatives to improve induction, handover of patients, feedback and trainee engagement, and areas of good practice such as our involvement of lay representatives in quality processes. The full [review](#) can be seen on the GMC website in the national and regional review section.

The GMC again carried out the National Training Survey for trainee doctors. The school is proud to say that 100% of our trainees completed the survey. The results of this survey is published on the GMC website and demonstrate that GP training in Kent, Surrey and Sussex delivers high levels of satisfaction. The importance of the survey is to provide feedback on areas where development could take place and where we have made available extra resources to support improvement activity.

GP trainers

The number of approved GP training practices in Kent, Surrey and Sussex is 259.

Number of approved GP trainers in Kent, Surrey and Sussex as of December 2015					
East Kent	53	Hastings	9	CRESH	51
Maidstone	19	Eastbourne	18	Epsom	24
Medway	18	Brighton & Mid-Sussex	48	Frimley	25
Tunbridge Wells	31	Worthing	23	Guildford	25
Dartford	22	Chichester	26	Chertsey	20
TOTAL	143		124		145
OVERALL TOTAL			412		

The process for approving and re-approving GP trainers has been reviewed in 2015. We are mindful of striking a balance between ensuring a robust process to assure individual educators and their practices against the increasing demands of clinical practice and we have been part of a national group reviewing educator approval processes, with new paperwork introduced in October 2015. Peer appraisal as an educator remains important with the requirement to demonstrate evidence of professional development in all roles for revalidation.

From September 2011, GPs undertaking the educational course to become a GP trainer are doing this as an integrated process to achieve a Postgraduate Certificate in Strategic Leadership and Medical Education, commissioned by us from the University of Kent.

Through 2015, potential new trainers enrolled on the PG certificate programme have received support from our team of academic mentors.

The department has continued to work closely with the University of Kent to develop the new PG Cert in Strategic Leadership & Multi-Professional Education in Healthcare programme and to ensure that university required processes such as the board of studies and exam board are delivered. We are pleased to congratulate our 24 students (GPs) in passing the PG Cert in cohort 4.

GP Trainer approval and re-approvals in 2015

GP trainer selection	New appointments	Re-approvals	Resignations
East Kent	5	8	4
West Kent	3	9	5
East Sussex	7	9	4
West Sussex	2	15	7
East Surrey	6	5	6
West Surrey	7	10	10
TOTAL	30	56	36

Post-certification GP School report

Activities undertaken by the school in 2015 include:

Support for the appraisal and revalidation of doctors

In 2015 we have worked in close collaboration with NHS England to support GP appraisers through our appraiser development centres (ADCs). The ADCs provide knowledge updates, leadership skills training and a consistent value-based approach to professional development that in turn ensures that GPs across Kent, Surrey and Sussex understand the principles and requirements for appraisal and revalidation.

The ADCs support the GMC principles for professional development:

- Improving healthcare and promoting a healthier society
- Encouraging individual responsibility for participation and recording of CPD activities
- Improving professional effectiveness and work satisfaction
- Ensuring CPD covers all areas of good medical practice and all GPs keep up to date
- Encouraging reflection upon a great range of clinical activities, planned and opportunistic
- Encouraging patient and public involvement
- Ensuring annual appraisal monitors CPD and produces appropriate PDPs
- Providing a continuing measure of assessment of performance where possible

Potential new appraisers are able to attend an awareness ADC which provides a structured programme that takes participants through awareness of the appraisal process and the competencies required of an appraiser on to an experiential learning session with detailed feedback from trained observers and simulators. Following appointment by the NHS England (NHSE) local team, new appraisers can return to the ADC for an initial training session before embarking on their first few appraisals (with heightened supervision initially provided by more experienced lead appraisers).

At the ADC Leadership Days, appraisers work on their motivational and developmental skills (looking at multi-source feedback and significant events) and abilities to bring judgement to CPD and audit material. All receive detailed feedback on their performance and their learning needs which they are encouraged to share with their lead appraisers. Leadership days stretch appraisers further, with simulated doctors bringing more difficult material to the discussion, and with further work on audit, judgement on CPD credits and problem solving skills.

Lead appraisers are also able to attend their own ADC, and have an opportunity to further develop their ideas of heightened appraisal and explore the additional responsibilities inherent within the lead appraiser role.

Collaboration with NHS England local team

The work described above of appraiser development centres is an example of the collaborative work undertaken between the post-certification school and the local offices of NHS England (NHSE). In previous years the Post Certification GP School met during the Quality Assurance of Appraisal Working Group (QAWG) which shared best practice and supported a robust system of quality management and quality control for the appraisal system in Kent, Surrey and Sussex. Alongside us, QAWG had representation from NHSE, the RCGP faculty, the LMC and general practice tutors. In 2015 it was felt these processes were sufficiently well established that QAWG could be safely disbanded although we still meet quarterly with NHSE.

General practitioner workforce development

General practice education over the past few years has seen a number of changes, with the general practice tutors responding to this in a number of different ways. Within Kent, Surrey and Sussex we have retained the general practice tutor role, and we have built upon their experience, skills and local knowledge to support the professional development of GPs and the wider primary care workforce in responding to emerging models of care.

General practice tutors are important members of the Post-certification GP school workforce, and facilitate the professional development of all GPs working in their area. Over the last two years they have increased their commitment to the facilitation of multi-professional learning within primary care and have worked increasingly closely with

primary care workforce tutors in delivering integrated education. This collaborative work also enhances their relationships with their local CCGs and recognises the work we have undertaken as it reflects the increased responsibility for the training and development of the whole primary care workforce with the development of Community Education Provider Networks.

Recruitment and retention strategy

As well as a commitment to increasing the GP workforce through increased GP specialty training programmes and incentives, the [ten point plan](#) recognises the need for developing strategies to attract trained GPs back and hold onto the existing workforce. The post CCT school supports work streams in line with the ten point plan. Activities include:

Induction and Refresher scheme

A revised national Induction and Refresher (I&R) scheme was launched in March 2015, co-ordinated through the GP National Recruitment Office and local offices of HEE. The scheme has a clearly articulated application process and supports doctors who trained as GPs outside the UK or UK GPs who have been out of general practice for over two years. Doctors entering the scheme have an educational needs assessment including an interview and MCQ test of knowledge and pending performance in the MCQ a simulated surgery before having an educationally and financially supported placement. The length of placements can vary from a few weeks to six months.

We have linked with the HEE local teams in Wessex and West Midlands, and with NHS England to support the development of observation placements for doctors on the scheme.

I&R activity in 2015

No. of Enquiries / potential I&R	No. scheduled to take assessments	No. passed SIM Surgery Jan 2016 & proceeding to placement	No. currently in a placement	No. successfully completed scheme
17	10	6	2	5

Doctor retainer scheme

This scheme has been in existence since 1999 and supports fully qualified GPs who, because of pressures on work life balance, are not able to take up a substantive partner or salaried role. The scheme most frequently supports those in a caring role or can support a return to practice following illness. We review individual doctors applying for the scheme and approve practices that can offer the type of support needed when one is working with reduced sessions. The scheme can support doctors usually for up to 5 years and currently can extend in exceptional circumstances.

Currently we have 27 retainer doctors working across Kent, Surrey and Sussex.

Learning sets for sessional GPs

Sessional GP is the term applied to those general practitioners who work as salaried doctors, clinical assistants, locums and retainer doctors. This includes both full and part-time employment. We are concerned that individual doctors working as sessional GPs are disadvantaged for several reasons:

- Sessional GPs can work in isolation, particularly those working as locums.
- They may not be part of any established primary health care team, and may work transiently in practices.
- They may be geographically mobile and thus do not build up a local support network with peers, nor can they easily access the local educational network for GPs.
- The nature of their status as an employee may mean that their personal and professional development may be subjugated to the demands, objectives and goals of the employing Practice.
- They may have difficulty in auditing their work or in accessing constructive feedback from patients, GP colleagues or other members of the primary care team.
- This group of GPs may have difficulty in obtaining meaningful information for their annual appraisal.

Learning sets have run successfully for several years. They are local groups that meet regularly to give peer support and guidance to their members and will help individuals with such matters as career advice, undertaking professional development activities, preparing for appraisal, and to help address many of the concerns listed above. Each group has

received initial financial support to help in the administration of the group and provide educational resources. Each group is led by one of the membership, and we organise an annual meeting of the group leaders that allows the groups to share expertise and good practice.

To date we have 26 groups across Kent, Surrey and Sussex, supporting around 400 sessional doctors.

Primary care transition support groups

The transition from supervised learner to unsupervised professional can be a difficult time as both doctors and nurses can feel isolated and unsupported when working within a new team. In 2015 we set up a two-year project with three pilot support groups for new GPs and new GP nurses, providing peer support and opportunities for shared professional development. The groups are facilitated by GP tutors or trained group members. The programme has been challenged in its ability to identify and recruit nurse members and the differing patterns and expectations in terms of how individuals identify time to undertake development activity.

Mentoring

Our GP mentoring scheme has run for over 20 years and offers non-judgemental, confidential peer-led support for all GPs in Kent, Surrey and Sussex. Mentors help both established and new GPs to reflect upon their current professional practice and help them develop professionally. This may help mentees resolve issues within their practice, or help them manage change or take a new career pathway.

The mentoring relationship is a confidential and supportive dialogue between the mentee and the mentor, which can last anything between a single meeting and a year or more. We believe that many more GPs could be supported through mentoring, but fail to come forward due to a lack of knowledge about the service offered. Information packs for mentors and mentees are available through the [website](#) and our aim is that everyone within the Kent, Surrey and Sussex educational network is aware of the mentoring scheme and is able to promote it across wider GP grassroots.

Currently we have 28 active mentors and they are mentoring just over 40 GP mentees, plus ten ST3 mentees. Mentors are supported through their own local learning sets, as

well as invited to workshops and the annual conference. Our mentor group convenors facilitate the process of peer appraisal of our mentors in order to maintain the quality of the network and the service offered.

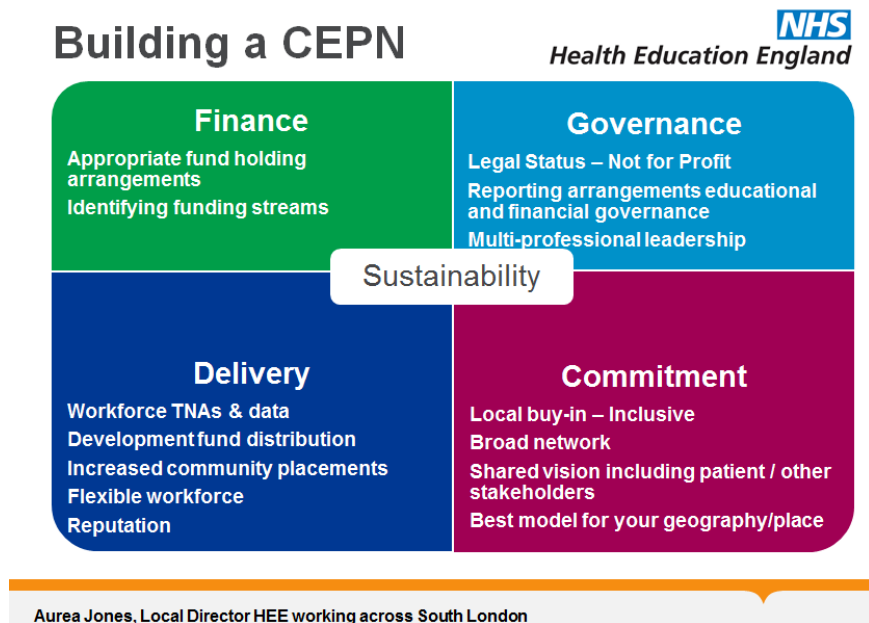
In 2015 we have continued to support GP specialty trainees who experience MRCGP exam failure in ST3. They are offered contact with a mentor trained in simple cognitive behavioural therapy techniques to help them with confidence, self-belief and motivation.

Community Education Provider Networks

A Community Education Provider Network (CEPN) is a group of primary and community care organisations that come together as a group of like-minded providers to collaborate on; workforce, education, training and placements, and creating an integrated and multi-disciplinary approach in response to workforce planning. CEPNs are also referred to as training hubs.

CEPNs will support the delivery of a workforce capable of meeting the needs of a local population's health and improve clinical outcomes through:

- Supporting workforce planning and development to respond to local needs and ensure any redesign of services within primary care and the community is better able support general practice.
- Improving education capability and capacity in primary and community settings through the development of multi-professional educators and the creation of learner placements.
- Improving education quality and governance and by acting as a local coordinator of education and training for primary and community care,
- Delivery at scale through increased buying power of commissioned courses.
- Better access to and uptake of education through co-ordination of local events.
- Management of financial educational resources e.g., education placement tariff and through this ensure best value for money for education.



We have worked alongside colleagues from the three London HEE local teams through a CEPN steering group to help develop a shared understanding of how CEPNs can be built and what structures and processes are required to support their sustainability, underpinned by sound quality and governance processes. This has led to agreed framework for CEPNs, as well as an information pack, which supports nascent CEPNs in the development of their business plan.

In 2014-15 Medway developed a CEPN as a community interest company and during 2015 there has been much work to establish the footprint of other CEPNs and a number are now poised for operational readiness. GP tutors, primary care workforce tutors, commissioning associate GP deans, GP PADs and programme directors have supported the process leading to this stage.

GP workforce tool

In January 2015 we launched the GP workforce tool to GP practices across Kent, Surrey and Sussex. The tool, which is supported by the Local Medical Committee, is complementary to the health and social care workforce minimum data set, and also has greater functionality allowing practices to review their own workforce data against aggregated local data. In spring, 2015 77% of practices had submitted data increasing to 86% by the autumn. For the first time this has given real time data information about the primary care workforce and will better inform future workforce planning.

Alongside this we have supported a pilot to help CCGs develop their workforce planning capabilities through the Universities of Kent and Surrey. A number of workshops have been held to look at planning for 2030, including how work might change and how workforce plans will need to reflect this. The pilot is due to report in April 2016.

Workforce transformation

Throughout 2015 activities we have continued to build the primary care workforce. This work is integral to our role and the primary care department's activities mainly relate to developing placement and supervision capacity in GP practices and ensuring supervisors are appropriately inducted to ensure patient and learner safety.

- Pre-registration nurse student placements - there are now 421 practice nurse mentors across all 20 CCGs to support pre-registration nurses in placements in primary care which equates to nearly 25% of practices in Kent, Surrey and Sussex. Since March 2015 244 students have been placed, and the primary care workforce tutors have been pivotal in developing this training resource.
- We have continued our work with the South East Coast Ambulance NHS Foundation Trust (SECAmb) to place paramedic practitioner students in GP training practices, supported by a steering group comprising representatives from stakeholders including HEIs, LMC, SECAmb and the primary care department. We have undertaken a commitment to offer placements for 40 paramedic practitioner students in general practice each year and the feedback has been positive from both the paramedic practitioner students and the GP training practices involved. GPST3 trainees are given an opportunity to support and teach the paramedic practitioner as part of the GP curriculum.
- We have been working with the pharmacy department to provide opportunities for pre-registration pharmacists to learn in GP practices, with a plan to extend this to offer GP specialty trainees opportunities to learn from community pharmacists. The first cohort of pre-registration pharmacists is due to commence in GP placements in April 2016. We are also beginning our work with NHS England to support the national programme to integrate community pharmacists into GP practices.

- Working in collaboration with four HEIs: Canterbury Christchurch, University of Kent, BSMS, Surrey University, and with Surrey and Sussex Healthcare NHS trust (SASH) we have established a diploma for physician associates (PA), with the first cohort of students embarking on their two year degree from April 2016. It is planned that the combined programmes can support the development of 100-120 PAs per year. The programme has been developed so that all PA students undertake learning in primary care, with a regular one day per week placement in Year 1 and a block of training in year 2.

In addition to the specific work streams detailed above, the primary care department has continued to support The Primary Care Academic Unit in the University of Kent with a professorial chair. The department is now delivering an intercalated BSc for medical students in management in primary care. Our aim is to continue to work with the University of Kent to develop community research and build academic programmes for pre and post CCT GPs and the wider primary care workforce.

Professor Hilary Diack

Head of Primary and Community Care Education

Appendix 1

Primary care department contact information 2015/16

Name	Title	Email Address
Dr Hilary Diack	Head of Primary & Community Care Education	hdiack@kss.hee.nhs.uk
Dr Chris Warwick	Head of GP Specialty School	cwarwick@kss.hee.nhs.uk
Dr Lisa Argent	Associate Dean for Commissioning	Largent@kss.hee.nhs.uk
Dr Susan Bodgener	Associate Dean for Assessment	sbodgener@kss.hee.nhs.uk
Dr Tony Jones	Associate Dean for Commissioning	tjones@kss.hee.nhs.uk
Dr Mohan Kangasundaram	Associate GP Dean (Simulation)	mkanag@kss.hee.nhs.uk
Dr Nathan Nathan	Associate GP Dean	nnathan@kss.hee.nhs.uk
Mr Steve Scudder	Lifelong Learning Adviser	sscudder@kss.hee.nhs.uk
Dr Mary-Rose Shears	Associate GP Dean East Sussex	mshears@kss.hee.nhs.uk
Dr Kim Stillman	Associate GP Dean East Kent & Medway	kstillman@kss.hee.nhs.uk
Dr Deborah Taylor	Associate GP Dean West Kent	nnathan@kss.hee.nhs.uk
Dr Bob Ward	Associate GP Dean East Surrey & Crawley	ward@kss.hee.nhs.uk
Dr Tariq Hussain	Associate GP Dean West Surrey	thussain@kss.hee.nhs.uk
Dr Hamish Whitaker	Associate Dean for Commissioning	hwhitaker@kss.hee.nhs.uk
Dr Glyn Williams	Associate Dear Education Pathway	gwilliams@kss.hee.nhs.uk
Dr Liz Norris	Associate GP Dean West Sussex	lnorris@kss.hee.nhs.uk
Admin Team		
Sandra Forster	Primary Care Business Manager*	sforster@kss.hee.nhs.uk
Alistair Bogaars	Interim GP Educator Pathway Manager	gpeducatorpathway@kss.hee.nhs.uk
David Buckle	GP Training Officer	dbuckle@kss.hee.nhs.uk
Daniel Dennis	GP Placements Administrator	ddennis@kss.hee.nhs.uk
Clare Donnelly	Interim CPD Administrator	cdonnelly@kss.hee.nhs.uk
Shekeh Golde	PA to GP Deans Office	sgolde@kss.hee.nhs.uk
Elena Gonzalez	GP Training/Recruitment Manager*	egonzalez@kss.hee.nhs.uk
Sharon Norton	GP Patch Management Administrator	snorton@kss.hee.nhs.uk
Donna McFarlane	Interim GP Training Assessment Administrator	dmcfarlane@kss.hee.nhs.uk
Dawn O'Grady	CPD Manager *	dogrady@kss.hee.nhs.uk
Sultana Parvez	GP Training Recruitment Officer	sparvez@kss.hee.nhs.uk
Shirelee Rebeiro	GP Payments and Office Administrator	srebeiro@kss.hee.nhs.uk
Anna Smith	Interim GP School Officer	snovakovic@kss.hee.nhs.uk
Sue Smith	GP Office Manager & Sussex Patch Manager *	ssmith@kss.hee.nhs.uk

Health Education England, working across Kent Surrey & Sussex
Department of Primary Care Education

Stewart House, 32 Russell Square, London WC1B 5DN

&

Crawley Hospital, 3rd Floor, Red Wing, West Green Drive, Crawley, West Sussex RH11 7DH

W: kssdeanery.ac.uk/general-practice