

<b>Title of meeting</b>	Primary and Community Care Programme Board	<b>Agenda item</b>	19.15
<b>Date of meeting</b>	8 January 2019	<b>Part 1 or 2</b>	N/A
<b>Title of paper</b>	Norfolk and Waveney Primary Care Workforce Update		
<b>Director (name and title)</b>	Sadie Parker, Director of Primary Care	<b>Author role (name and title)</b>	Jayde Robinson GPFV Workforce Programme Manager
<b>Action requested</b>	Approval <input type="checkbox"/>	Noting	<input checked="" type="checkbox"/>
<b>Purpose of paper:</b>	To provide the Primary and Community Care Programme Board with a current overview of the Norfolk and Waveney STP Primary Care Workforce agenda.		
<b>Executive summary</b> (200 word limit)	<p>NHS England have previously expressed concerns over our STP Primary Care Workforce planning delivery and that our STP was regarded as high risk for primary care workforce.</p> <p>However at the recent GPFV Workforce Checkpoint meeting held on the 10 December 2018, NHSE noted that our STP have increased our momentum and noted our commitment to the delivery of our schemes.</p> <p>A full summary of the headlines below are featured in further detail of the report:</p> <ul style="list-style-type: none"> <li>• Current GPFV Trajectory Position</li> <li>• Key Milestones Delivered</li> <li>• Upcoming Milestones</li> <li>• Risks</li> <li>• Appendices</li> </ul>		
<b>Recommendation to Governing Body/Committee</b>	<ol style="list-style-type: none"> <li>1. Review of the Norfolk and Waveney STP Primary Care Workforce Update to aid discussion.</li> <li>2. Review the GPFV Workforce: Norfolk &amp; Waveney STP Checkpoint Meeting Outcome Letter which is detailed in Appendix 3</li> </ol>		
<b>Staff, patient, stakeholder engagement:</b>	As per the breakdown below.		
<b>Key Risks</b>			
Clinical	N/A		
Finance and performance	N/A		
Impact assessment (environment and equalities)	N/A		
Reputation	N/A		
Legal	N/A		

Resource required	N/A
Reference document	N/A
NHS Constitution	N/A
Conflicts of interest	N/A
<b>Directorate involvement (Name and title)</b>	
Finance	N/A
Quality	N/A
Quality CHC	N/A
Clinical Commissioning	N/A
Primary Care	Sadie Parker, Director of Primary Care
Communication and Corporate Affairs	Jayde Robinson, Senior Governance Manager
<b>Governance</b>	
GB/Committee approval/rejection of recommendation with dates	<ul style="list-style-type: none"> <li>• NHS England GPFV Oversight Group 17<sup>th</sup> January 2019</li> <li>• Norfolk and Waveney Primary Care Assurance Group 24<sup>th</sup> January 2042<sup>nd</sup> November 2018</li> </ul>

## Norfolk and Waveney STP Primary Care GPFV Trajectory Position:

### Norfolk & Waveney – GPFV Trajectories Summary

Name of scheme/initiative	Direct/Indirect Support	Target No of GP to be supported by March 2019	Primary Target Group	Total No GP receiving support as at 3 January 2019	Delivery Confidence RAG rating
GP Careers Plus	Both	12	Considering Leaving	<ul style="list-style-type: none"> <li>2 signed up for Norwich in January 19</li> <li>1 further expression of interest for Norwich CCG (awaiting sign up)</li> </ul> <b>Total Active 2 (Norwich CCG)</b>	Green
GP Careers Plus Pilot	Both	5	Considering Leaving	<ul style="list-style-type: none"> <li>5 signed up for GYWCCG Pilot (2 are now GP salaried, 1 left scheme)</li> <li>1 Signed up for GYWCCG in Dec 18</li> <li>1 further expression of interest for GYWCCG (awaiting sign up)</li> </ul> <b>Total Active 3 (GYWCCG)</b>	Green
National Funding Opportunities	Both	5	Retired/Retiring	0	Amber
GP Fellows	Both	5	Newly qualified & first 5 years	0	Amber
Joint Trainee Retention	Both	3 (new target set)	Newly qualified & first 5 years	0	Amber
Careers Start	Both	9	Newly qualified & first 5 years	1	Amber
	<b>Total</b>	<b>Total 36 (excludes Joint Trainee Retention)</b>	<b>Total</b>	<b>8 to be reported against trajectories</b>	<b>Red</b>

## Delivery Confidence Guidance

Definition of Delivery Confidence	RAG
Successful delivery of scheme / initiative to time, quality and cost appears highly likely and there are no major outstanding issues/risk that appear to threatens delivery significantly.	G
Successful delivery appears probable although regular attention will be needed so issues / risks do not materialise into major issues threatening delivery <b>OR</b> Successful delivery appears feasible but significant issues already exist, requiring management attention. These appear resolvable if addressed promptly and should not present a cost/schedule overrun.	A
Successful delivery of the scheme / initiative is in doubt with major risk and issues apparent in a number of key areas. Urgent action needed to ensure these are addressed, and whether resolution is feasible <b>OR</b> Successful delivery of scheme / initiative appears to be unachievable. There are major issues in terms of time / cost / quality which at this stage do not appear to be manageable or resolvable. The scheme / initiative may need re-baselining and / or overall viability re-assessed.	R

### **Norfolk and Waveney STP Primary Care GPFV Key Milestones Achieved:**

- Monthly updated project plans received for GPFV schemes and enablers of the GPFV retention planning programme as per **Appendix 1** structure.
- Monthly review of Norfolk and Waveney's STP Primary Care Workforce trajectory figures, incentive schemes and current risk level as per **Appendix 2**.
- Reduction in data quality issues across STP. This resulted in a reduction of 5.6% for GP workforce data quality issues and 5.5% for Nursing data quality issues
- Appointment of Primary Care Workforce Coordinator and Apprentice, hosted by Great Yarmouth and Waveney CCG, to support the delivery of the GPFV trajectories.
- Seven successful bid applications achieved across Norfolk and Waveney STP within Wave 7 of the Clinical Pharmacists funding
- Rollout of GP Careers Plus scheme across STP now targeting Norwich practices in phase 1.
- GPFV additional funding bid submitted to NHSE for £200k. This includes new retention scheme "GP Welcome Back programme", enhancing our GP Careers plus Scheme. GPFV wellbeing programme and GPFN GP Careers Plus. Awaiting outcome of this submission.
- Norfolk and Waveney STP Practice level diabetes services submitted to NHSE, awaiting outcome of expression of interest.
- GPFV budget and expenditure reportable to Norfolk and Waveney STP Assurance on a monthly basis
- Excellent progress made with the General Practice Nursing Development 10 Point Plan and the training hub
- Norfolk and Waveney Primary Care Assurance Review – terms of reference, Membership agreed
- GPFV Programme Manager secondment confirmed until September 2019

### **Norfolk and Waveney STP Primary Care GPFV Upcoming Milestones:**

- Ongoing review of live "data quality issues"
- Review of trajectory figures against each GPFV retention scheme
- Signed MOU with Norfolk Primary Ltd for Careers Start scheme
- NHS England STP Workforce Checkpoint Assurance Meeting on Norfolk and Waveney STP workforce progression – January
- Engagement and Communication across STP for GP Practices for GPFV incentives. Confirmation of operational lead to be confirmed
- Review of Clinical Pharmacists requirements across STP in preparation for the Wave 8 submission process (due 22 February 2019)

- Review of STP Coordinator Band 6 secondment fixed term, currently leading GP Careers Plus
- Enhanced focus of GP National Retention Schemes and GP Fellowship with new Band 6 appointment
- Explore the development of the Primary Care Networks within the operational delivery of the GPFV and STP workforce agenda
- Review the recommendations set out in the GPFV Workforce: Norfolk & Waveney STP Checkpoint Meeting Outcome Letter, detailed in **Appendix 3**, by realigning any operational and strategic delivery deliverables within the GPFV agenda

### **Norfolk and Waveney STP Primary Care GPFV Risks:**

NHS England are reporting three risks for Norfolk and Waveney STP nationally in relation to the delivery of GPFV trajectories, which can be found in **Appendix 4**.

In summary these areas are:

- Lack of primary care workforce due to vacancies and impending retirements
- Delays for GP international recruitment impacting trajectories
- Limited staff/resource capacity to deliver trajectories

We anticipate “risk 3” will be mitigated once the STP workforce appointments commence in January 2019.

### **Data Quality**

Norfolk and Waveney have significantly reduce the amount of workforce data quality issues during the period of September 18. Our improvement was highlighted by NHSE in December 2018, however it was also noted that further reductions are required to hit a 0% variance by March 2019.

To aid this delivery plan, weekly reports are being communicated with each of the Norfolk and Waveney CCG’s highlighting live data quality issues via the NHS Primary Care Workforce tool.

The GPFV Workforce Programme Manager and the STP Data Quality Champion are supporting practices and CCG’s and escalating workforce tooling issues to NHSE.

<b>GPs</b>											
<b>Data quality issues requiring estimation</b>	Sep-15	Mar-16	Sep-16	Dec-16	Mar-17	Jun-17	Sep-17	Dec-17	Mar-18	Jun-18	Sep-18
N of practices in census	114	113	112	112	110	109	108	108	108	108	107
N of practices requiring GPs estimation	16	9	25	11	11	8	8	10	13	10	4
<i>N of practices not submitting *</i>	n/a	n/a	n/a	n/a	n/a	1	3	3	1	1	1
<i>N of practices with invalid GP data *</i>	n/a	n/a	n/a	n/a	n/a	7	5	7	12	9	3
% of practices requiring GPs estimation	14.0%	8.0%	22.3%	9.8%	10.0%	7.3%	7.4%	9.3%	12.0%	9.3%	3.7%
<b>Additional data quality issues</b>											
N of GP Retainers reported	0	0	0	1	1	2	2	2	2	2	3
N practices with invalid Retainer participation rate	0	0	0	0	0	0	0	0	1	0	0
% of practices with invalid Retainer participation	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.9%	0.0%	0.0%
<b>Nurses</b>											
<b>Data quality issues requiring estimation</b>	Sep-15	Mar-16	Sep-16	Dec-16	Mar-17	Jun-17	Sep-17	Dec-17	Mar-18	Jun-18	Sep-18
N of practices in census	114	113	112	n/a	110	n/a	108	108	108	108	107
N of practices requiring Nurses estimation	17	7	8	n/a	10	n/a	11	12	15	15	9
<i>N of practices not submitting *</i>	n/a	1									
<i>N of practices with invalid/missing Nurses data *</i>	n/a	14	8								
% of practices requiring Nurses estimation	14.9%	6.2%	7.1%		9.1%		10.2%	11.1%	13.9%	13.9%	8.4%
<b>Data quality review process</b>											

## Norfolk and Waveney Trajectory Figures

Norfolk and Waveney STP have been asked to review our current primary care workforce trajectories by NHS England in December 2018. However NHSE have confirmed a new template for reporting will be issued to the STP. We anticipate revised trajectories will be submitted in January 2019 within the new reporting template.

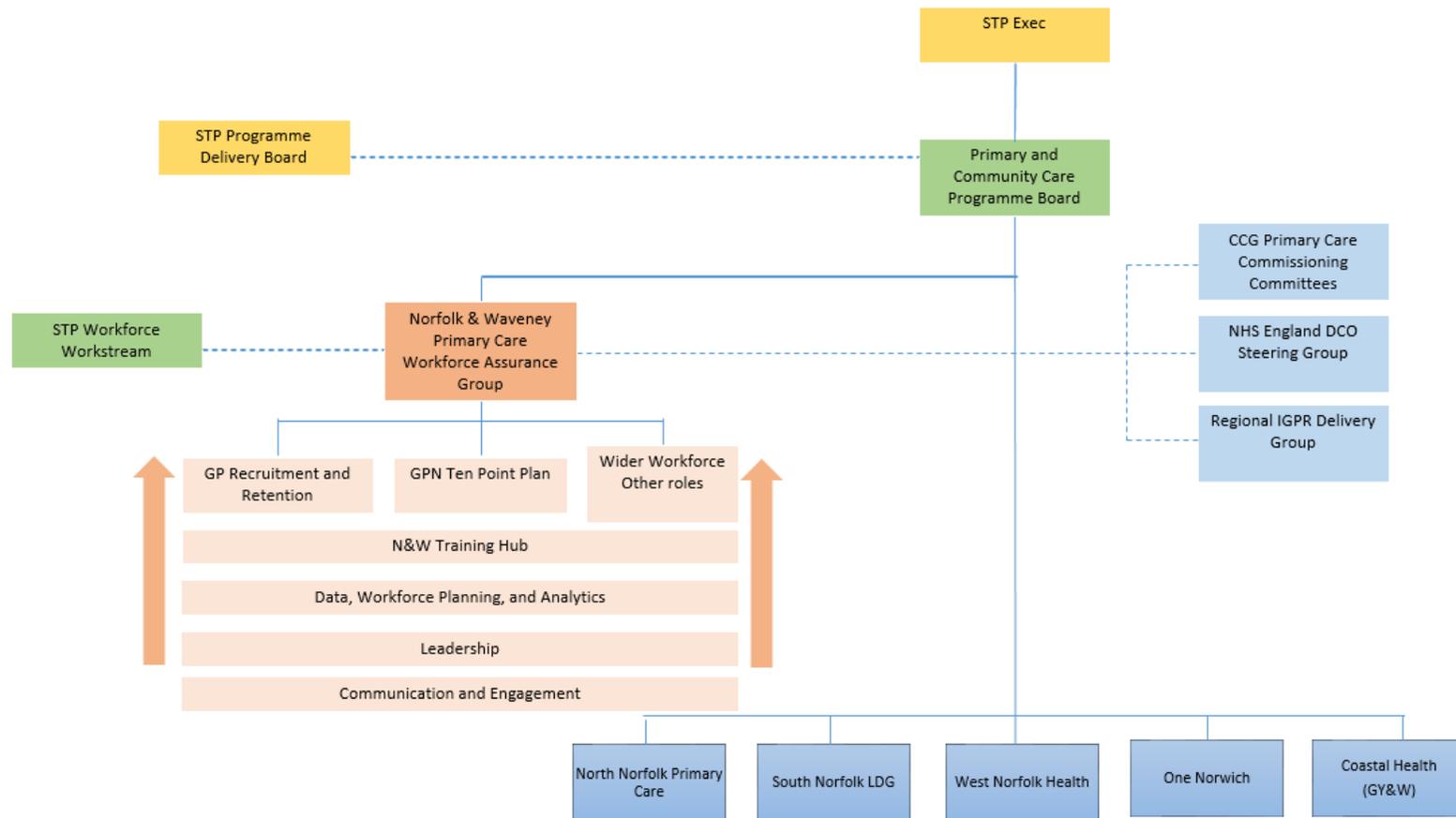
## Recommendation

Primary and Community Care Programme Board members are asked to note this update and highlight any specific areas they would like reported as part of this governance arrangement. In addition, this board is asked review **Appendix 3** to determine if any strategic elements will be taken forward by this group.

Work continues to refine plans through scheme leads and is overseen by the STP Primary Care Workforce Assurance group.

Risk management will be managed through the Norfolk and Waveney STP Primary Care Assurance Group monthly by having robust governance arrangements in place.

## Appendix 1 - Norfolk and Waveney STP Governance Structure for GPFV



## Appendix 2 - Norfolk and Waveney Delivery Plan

## Norfolk and Waveney STP

Task ID	Task Breakdown	Status	Trajectory Figures (Target) by March 2022	Trajectory Figures (Actual)	Lead CCG	Strategic Lead	Operational Lead	Support Lead
<b>Primary Care Workforce Assurance Group</b>								
1.1	STP Primary Care Workforce Assurance Group membership agreed	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Emma Wakelin
1.2	Establish workstream leads	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Emma Wakelin
1.3	Meeting timetable set up	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Emma Wakelin
1.4	Agree accountable owner for the Delivery Plan	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Emma Wakelin
1.5	Terms of reference agreed	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Emma Wakelin
1.6	Agree assurance / reporting on Delivery Plan progress	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Emma Wakelin
1.7	Agree checkpoints for periodic review of workforce plan document & trajectory; build into delivery plan	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Emma Wakelin
1.8	Agree Stakeholders	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Emma Wakelin
1.9	Communication and Engagement Plan developed	Critical	N/A	N/A	GYWCCG	Sadie Parker	TBC	Emma Wakelin
1.10	Risk assessment undertaken and register produced	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Emma Wakelin
<b>Training Hub</b>								
2.1	Develop project plan to incorporate Pilot and Education and Training roll out across STP	Complete	N/A	N/A	Norwich CCG	Dr Emma Brandon	Tracey Parkes	Lauren Emmerson
2.2	Monitor and review delivery of project plan	On Track	N/A	N/A	Norwich CCG	Dr Emma Brandon	Tracey Parkes	Lauren Emmerson
2.3	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	Norwich CCG	Dr Emma Brandon	Tracey Parkes	Lauren Emmerson

Task ID	Task Breakdown	Status	Trajectory Figures (Target) by March 202	Trajectory Figures (Actual)	Lead CCG	Strategic Lead	Operational Lead	Support Lead
<b>GP Careers Start</b>								
3.1	Develop project plan to incorporate GP Start roll out across STP	At Risk	N/A	N/A	GYWCCG	Sadie Parker	James Leeming	N/A
3.2	Monitor and review delivery of project plan	At Risk	30	1	GYWCCG	Sadie Parker	James Leeming	N/A
3.3	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	GYWCCG	Sadie Parker	James Leeming	N/A
<b>GP Careers Plus</b>								
4.1	Develop project plan to incorporate Pilot and GP Careers Plus roll out across STP	Complete	N/A	N/A	GYWCCG	Ben Hogston	Lauren Emmerson	Apprentice
4.2	Monitor and review delivery of project plan	On Track	32	5	GYWCCG	Ben Hogston	Lauren Emmerson	Apprentice
4.3	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	GYWCCG	Ben Hogston	Lauren Emmerson	Apprentice
<b>International GP Recruitment</b>								
5.1	Implement governance for IGPR working group including schedule of meetings, TOR and agenda.	Complete	N/A	N/A	GYWCCG	Julie Baran	Eleanor Ward	N/A
5.2	Advertise 8b Programme Manager role and set interview dates.	Complete	N/A	N/A	GYWCCG	Julie Baran	Eleanor Ward	N/A
5.3	Advertise x2 band 5 IGPR Coordinator roles and set interview dates.	Complete	N/A	N/A	GYWCCG	Julie Baran	Eleanor Ward	N/A
5.4	Monitor and review delivery of project plan	Critical	41	0	GYWCCG	Julie Baran	Eleanor Ward	N/A
5.5	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	GYWCCG	Julie Baran	Eleanor Ward	N/A

Task ID	Task Breakdown	Status	Trajectory Figures (Target) by March 202	Trajectory Figures (Actual)	Lead CCG	Strategic Lead	Operational Lead	Support Lead
<b>GP Fellowships</b>								
6.1	Develop project plan to incorporate GP Fellows roll out across STP	Complete	N/A	N/A	Norwich CCG	Dr Emma Brandon	Tracey Parkes	Band 6 post (recruitment)
6.2	Lead recruitment of fellowships across the patch including advertising and liaison with the UEA.	At Risk	15	0	Norwich CCG	Dr Emma Brandon	Tracey Parkes	Band 6 post (recruitment)
6.3	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	Norwich CCG	Dr Emma Brandon	Tracey Parkes	Band 6 post (recruitment)
<b>General Practice Nursing Development and 10 point plan</b>								
7.1	Develop project plan to GP Nursing and 10 point plan roll out across STP	Complete	N/A	N/A	Norwich CCG	Karen Watts	Evelyn Kelly	Emma Wakelin/Anna Morgan
7.2	Monitor and review delivery of project plan	On Track	40	0	Norwich CCG	Karen Watts	Evelyn Kelly	Emma Wakelin/Anna Morgan
7.3	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	Norwich CCG	Karen Watts	Evelyn Kelly	Emma Wakelin/Anna Morgan
<b>Wider Workforce - new roles, physican associates, clinical pharmacists</b>								
8.1	Develop project plan to wider workforce roll out across STP	Complete	N/A	N/A	STP Wide	Anna Morgan	Emma Wakelin	Emma Wakelin
8.1.1	Monitor and review delivery of project plan - Physioan Associates	On Track	N/A	N/A	STP Wide	Emma Wakelin	Lauren Emmerson	N/A
8.1.2	Monitor and review delivery of project plan - Clinical Pharmacists	On Track	N/A	N/A	GYWCCG	Michael Dennis Jessica Adcock	Jayde Robinson	Band 6 post (recruitment)
8.2	Monitor and review delivery of workforce project plan	On Track	22	0	STP Wide	Anna Morgan	Emma Wakelin	Emma Wakelin
8.3	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	STP Wide	Anna Morgan	Emma Wakelin	Emma Wakelin
<b>Leadership - incorporating Pratices Managers, Apprenticeships, Care Navigators, Administrators</b>								
9.1	Develop project plan for Leadership roll out across STP	Complete	N/A	N/A	North/South CCG	Sally Ross-Benham	Mandy Wegg	Emma Wakelin
9.2	Monitor and review delivery of project plan	On Track	0	0	North/South CCG	Sally Ross-Benham	Mandy Wegg	Emma Wakelin
9.3	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	North/South CCG	Sally Ross-Benham	Mandy Wegg	Emma Wakelin

Task ID	Task Breakdown	Status	Trajectory Figures (Target) by March 202	Trajectory Figures (Actual)	Lead CCG	Strategic Lead	Operational Lead	Support Lead
<b>Data Quality and Data Analysis</b>								
10.1	Develop project plan for data quality and analysis roll out across STP	Complete	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Eleanor Ward
10.2	Monitor and review delivery of project plan	On Track	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Eleanor Ward
10.3	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	GYWCCG	Sadie Parker	Jayde Robinson	Eleanor Ward
<b>National Funding Schemes</b>								
11.1	Develop project plan for national funding schemes roll out across STP	Complete	N/A	N/A	GYWCCG	Sadie Parker	Band 6 post (recruitment)	Apprentice
11.2	Monitor and review delivery of project plan	At Risk	13	0	GYWCCG	Sadie Parker	Band 6 post (recruitment)	Apprentice
11.3	Report to Norfolk and Waveney Primary Care Assurance Group	At Risk	N/A	N/A	GYWCCG	Sadie Parker	Band 6 post (recruitment)	Apprentice
<b>Joint GP Retention Scheme with Suffolk (Pastoral Support)</b>								
12.1	Develop project plan to GP Retention scheme with Suffolk across STP	Complete	N/A	N/A	GYWCCG	Julie Baran	Eleanor Ward	N/A
12.2	Monitor and review delivery of project plan	On Track	8	0	GYWCCG	Julie Baran	Eleanor Ward	N/A
12.3	Report to Norfolk and Waveney Primary Care Assurance Group	On Track	N/A	N/A	GYWCCG	Julie Baran	Eleanor Ward	N/A

## Appendix 3 - GPFV Workforce: Norfolk & Waveney STP Checkpoint Meeting Outcome Letter



**To:**

Melanie Craig, Norfolk & Waveney STP AO  
Sadie Parker, Director of Primary Care Great  
Yarmouth & Waveney CCG  
Jayde Robinson, GPFV Workforce Programme Lead  
Norfolk & Waveney STP

Medical Directorate

NHS England

Victoria House  
Capital Park  
Fulbourn  
Cambridge  
CB21 5XB

20 December 2018

Dear colleagues,

### **GPFV Workforce: Norfolk & Waveney STP Checkpoint Meeting on 10<sup>th</sup> December 2018**

Thank you for your commitment to this checkpoint exercise to take stock of progress being made on the Workforce Workstream within the General Practice Forward View. The STP return was completed to a high standard and a strong team was fielded for the meeting including the STP AO.

We are pleased to note early achievements by the STP team including:

- A strong link between the primary care workforce programme and the LWAB (“Workforce workstream”) which provides oversight and leadership
- A dedicated delivery and assurance group for primary care workforce chaired by the STP SRO for GPFV Workforce; all constituent CCGs are represented and take the lead on an aspect of the programme
- Primary care vision being refined through the Aspirant ICS programme with £0.5m funding for development of Primary Care Networks
- A wide range of retention schemes within the plan that considers all stages of the GP career
- Begun rollout of the Career Plus scheme beyond GY&W CCG, 2 doctors signed on in Norwich CCG
- Strong nursing workforce plan
- Improvement in data quality for doctors and nurses from previous quarter
- Primary Care Quality Group chaired by Dr Paul Berry provides a good foundation for developing clinical governance and professional support to diverse primary care workforce
- Recognition that mental health is integral to primary care plans – mental health review by Boston Consulting Group
- Emerging thinking around expanding Careers Plus and Careers Start schemes to nursing

- Joint working with LMC, Training hub, LWAB to maximise the impact of the programme

We discussed further work required in the following areas:

- There isn't a STP primary care strategy document which captures the totality of STP plans to transform and improve primary care services though it was stated that this is captured in a range of documents. Also, there was little support for the idea or value of a "top-down" primary care strategy, preferring bottom-up engagement. Nevertheless, there is still a case to be made for a single coherent statement and/or commitment (however arrived at) of your plan for primary care transformation which clearly communicates the intended improvement in what it feels like to work in primary care and which primary care colleagues will find supportive and will retain and develop their skills.
- Work towards quantifying your workforce needs based on the STP primary care strategy, primarily to allow you to check that the scale of your solutions for the primary care workforce match your challenge. Given your trajectory, we suspect that your initiatives are undersized.
- Develop a mentoring/coaching support offer for GPs in all career stages
- Develop peer networks for GPs particularly First-5s
- Ongoing commitment of funding for primary care workforce programme including STP workforce team, retention schemes and Training hub. You should plan for the Training Hub to be business as usual for your system – even if HEE funding is no longer available.
- Ensure that your attractive portfolio of GP retention schemes kick-off at a fast pace in the coming weeks. For these to retain their attractiveness to GPs who are questioning their continued place in the workforce, you will need to ensure that there is a sustainable funding model after national funding finishes in March.
- Work with and support practices to create flexible and imaginative job offers which match the flexibility sought by our newer GPs.
- Facilitate more professional HR processes in primary care – we know of GPs who have been discouraged by poorly managed recruitment processes.
- You may wish to consider a more involved approach to broker agreements between trainees (or other GPs) to known vacancies in practices.
- Develop a wraparound support package that responds to the concerns of trainees and newly qualified doctors. This could be very similar to the pastoral support intended for your incoming overseas GPs and link to the brokering arrangement referred to above.
- Develop offers that will attract locums to salaried general practice (wraparound support with CPD, appraisals, personal development)
- Develop a "single point of contact/referral" to provide advice, career guidance, and signposting to the emerging job opportunities in your patch and linking to a brokerage function for practice vacancies.
- Develop peer and professional support offers for wider workforce, ensuring that we strengthen clinical governance, supervision and professional development for the growing numbers of other health care professionals now working in primary care. You should also consider what kind of response and support you can give to a practice and their health care worker in the likely event of a serious clinical incident attribute to one of these newer primary care professionals.
- Engage with practices on Physician Associates to improve uptake and take advantage of HEE preceptorship funding
- Understand the issues and challenges around recruitment to Clinical Pharmacist posts by linking in with other STP areas, particularly Suffolk & North East Essex and Cambridgeshire &

Peterborough

- Develop a programme of work around apprenticeships in all areas of primary care
- Collate practice level information on which of the 10 High Impact Actions have been implemented at each practice. There is no logical reason why you should stop promoting the 10 HIAs once you have reached the existing modest target of just 2 of these HIAs – all of which reduce GP workload.
- Further work on data quality to get to 0% estimation for doctors and nurses

You requested support on:

- Collecting data on professionals who work across different practices and/or are not employed by a practice. The PMO team will work with the STP workforce lead and data quality champion on this with advice from NHS Digital
- Information on past applications for Clinical Pharmacists which were unsuccessful so as to support those practices in making successful applications going forward. The PMO team will liaise with the Clinical Pharmacist team to obtain this information.

Please ensure every effort is made to follow through on the areas cited above for further development.

NHS England will continue to facilitate sharing and learning across STP boundaries through the GPFV Workforce subgroup so we have a “best of breed” workforce programme across the DCO. The next GPFV Workforce Subgroup meeting is scheduled for 31<sup>st</sup> January 2019. Please produce 2-3 slides that outline your work on First 5 networks and GP mentorship to be presented at the meeting. Please include an overview of your plans, the clinical leadership you have secured, and progress to date including the number of GPs that are currently engaged in these networks/programmes.

If you need any clarification then please do not hesitate to contact me. In the meantime, the GP Forward View PMO team will remain in close contact with your teams to support your workforce programme.

Sincerely,



**Dr Alistair Lipp**  
**NHS England Midlands & East (EAST), Medical Director**

Cc:

Simon Evans-Evans, NHS England Locality Director for Cambridgeshire & Peterborough and Norfolk

Dr Paul Berry, GP Careers Plus Scheme member, GYWCCG

Karen Watts, Director of Quality, Chief Nurse, Norwich CCG

Julie Baran, International GP Recruitment Manager

Richard Pelan, Workforce Transformation Lead, Health Education England

## Appendix 4 - GPFV Risk Register

### GENERAL PRACTICE

#### FORWARD VIEW

Midlands & East GP Forward View Programme

#### Risk Register

1. STP		2. Risk Description and Scoring				3. Risk Scoring		4. Risk Management		5. Post Risk Management Re-scoring			6. Change	
STP	Risk No	Event (If)	Probability of the Event Happening	Consequence (Then)	Impact of the Consequence Happening	Risk Severity	Severity Description	Type of Action	Action to be taken	Probability of the Event Happening	Impact of the Consequence Happening	Post Risk Severity	Severity Description	Trend
Norfolk and Waveney	1	Lack of primary care workforce due to vacancies and impending retirements	4 - Likely	Impact service delivery to patients	4 - Major	16	Immediate action required and/or continued regular monitoring required	Mitigate	Development of action plan to create efficiencies from working at scale overseen by Joint Clinical Commissioning Group Pilot of Repeat Prescribing Hub to release General Practice (GP) time Workforce Project Initiation Document (PID) to be introduced Introduction of Data Quality champion to ensure GP Practices data is accurate to enable workforce planning	1 - Rare	4 - Major	4	Action should be taken and/or continued monitoring required	Decreased
Norfolk and Waveney	2	Delays to International GP Recruitment	4 - Likely	created a gap in the STP Primary Care workforce trajectory and GP capacity numbers	4 - Major	16	Immediate action required and/or continued regular monitoring required	Mitigate	Risk of not hitting trajectory raised with NHS E and Dr Alistair Upp (email dated 23/07/18) and noted on the CCG Primary Care, STP and LWAB risk registers. Re-focus of delivery on GP retention plans to meet trajectory gap and awaiting approval from five CCGs for STP Primary Care Workforce Coordinator (band 6) and an Apprentice to provide project support and capacity to the implementation of the GP retention bid.	1 - Rare	4 - Major	4	Action should be taken and/or continued monitoring required	Decreased
Norfolk and Waveney	3	Limited staff resource/capacity to deliver and engage with the workforce to promote retention schemes.	3 - Possible	Retention schemes are not delivering to their full potential.	4 - Major	12	Action should be taken and/or continued monitoring required	Mitigate	We are mitigating for this by putting in dedicated resources who will link in with Primary Care Teams to utilise existing engagement forums to promote the scheme with GPs.	2 - Unlikely	4 - Major	8	Action should be taken and/or continued monitoring required	Decreased