

Case Study: Developing portfolio roles for GPs and sharing the lessons

Devon Doctors Ltd. provides the Integrated Urgent Care Service (IUCS) for Devon and Somerset which comprises NHS 111, the clinical assessment service and the out-of-hours GP service. Securing a sustainable workforce for Integrated Urgent Care Services is becoming harder as the pressures on the health system increase and as individuals seek a better balance between work and life.

In response to this, Devon Doctors Ltd. has managed two projects. The first project ran from January to September 2018 with the scope to develop a substantive portfolio role that combined the challenge of working across health care settings with the opportunity to experience a varied rotational week with support from colleagues – in the belief that offering something different would attract and retain GPs in urgent care.



During the project Devon Doctors:

- Completed desktop research to understand the types of portfolio roles that already exist and to understand GP career intentions and attitudes toward portfolio working
- Ran a focus group with local Specialty Trainee doctors (ST3s) and an online survey to test an early design of a portfolio role
- Engaged with a local Acute Trust to develop a job description and an outline job plan for a portfolio role that would enable a GP to work in General Practice, in the IUCS and in the Acute Trust with additional sessions for education and peer support
- Agreed a salary model that provided fair remuneration across healthcare settings
- Agreed outline approaches for induction and supervision and an outline recruitment strategy for the portfolio roles

The second project commenced in October 2018 and is due to complete in September 2019 with the scope to share the lessons from the first project via presentations and roundtable events, and to provide project support to STPs who are starting to consider portfolio working as an element of their system workforce strategy. Through this work it is clear that the approach taken to developing GP portfolio roles can be applied to many other professional groups.

This case study will focus on the first project.

Key Outcomes

- The focus group and online survey provided original evidence that local ST3s would consider a portfolio role as a first option on qualifying (92% of respondents). The research also provided clarity in terms of the top three factors that make portfolio roles attractive – variety of work and opportunity (87%), work life balance (78%) and flexibility (74%). In addition, 83% of respondents favoured a substantive salaried role with a main employer that provided a portfolio of work
- The project produced key deliverables that can be replicated by other organisations to develop portfolio roles. The approach taken can also be followed to develop portfolio roles for other professional groups such as advanced nurse practitioners and pharmacists
- Devon Doctors has successfully recruited its first portfolio GP and is developing opportunities for advanced nurse practitioners

Background

Devon Doctors Ltd. was originally a co-operative established in 1996. It became a social enterprise in 2004 and is run by healthcare professionals as a non-profit organisation, with any profits generated being invested back into the service. Its headquarters are in Exeter, Devon. It has a further site in Devon that houses its Integrated Urgent Care Service and one in Somerset. It is commissioned by the NHS in Devon and Somerset to provide the county's Integrated Urgent Care Services (IUCS), which brings together out of hours care and the NHS 111 phone line for over two million people. Devon Doctors employ over 300 members of staff and are led by a management team, overseen by a board of directors. The team include call handlers, drivers, reception staff, GPs, nurse practitioners, call centre coordinators and supporting office staff holding lead roles such as clinical governance, recruitment, rotas and medicines. Supporting staff also include communication and information governance staff. Devon Doctors also provides Improved Access and has subsidiaries providing in-hours General Practice, urgent out of hours dental services and a dental helpline.

Securing a sustainable workforce for Integrated Urgent Care Services is becoming harder as the pressures on the health system increase and as individuals seek a better balance between work and life.

The evolution of General Practice is an essential component to meeting the aspirations of the NHS Long Term Plan (January 2019) - to centre care holistically on the needs of patients and populations and blur the boundaries between primary and secondary care; health and social care; physical and mental health. It is accepted that our population continues to grow and continues to get older with those living longer often living with multiple long-term conditions and more complex needs. This increase in complexity means the way we think about the provision of healthcare is changing and so too is the way we think about the workforce needed to deliver such change.

The Royal College of GPs (September, 2016: 10) acknowledges that GPs will be vital to the 'interface of care' when their role as integrator will mean they can work across health care settings using their expert generalist skills to quickly assess patients' needs to help manage the pressures on emergency admissions. Working at the 'interface of care' naturally means new roles are needed that will enhance the function of the GP working alongside urgent and emergency colleagues in different care settings to improve patient experience and outcomes.

In response to the strategic direction of the NHS, the perceived career intentions of GPs and the ever increasing workforce challenges, Devon Doctors set about the careful design of a new portfolio urgent care roles that combine the challenge of working across health care settings with the opportunity to experience a varied rotational week with support from colleagues in the belief this may encourage more clinicians to work locally after completion of training and may encourage others to return to the service.

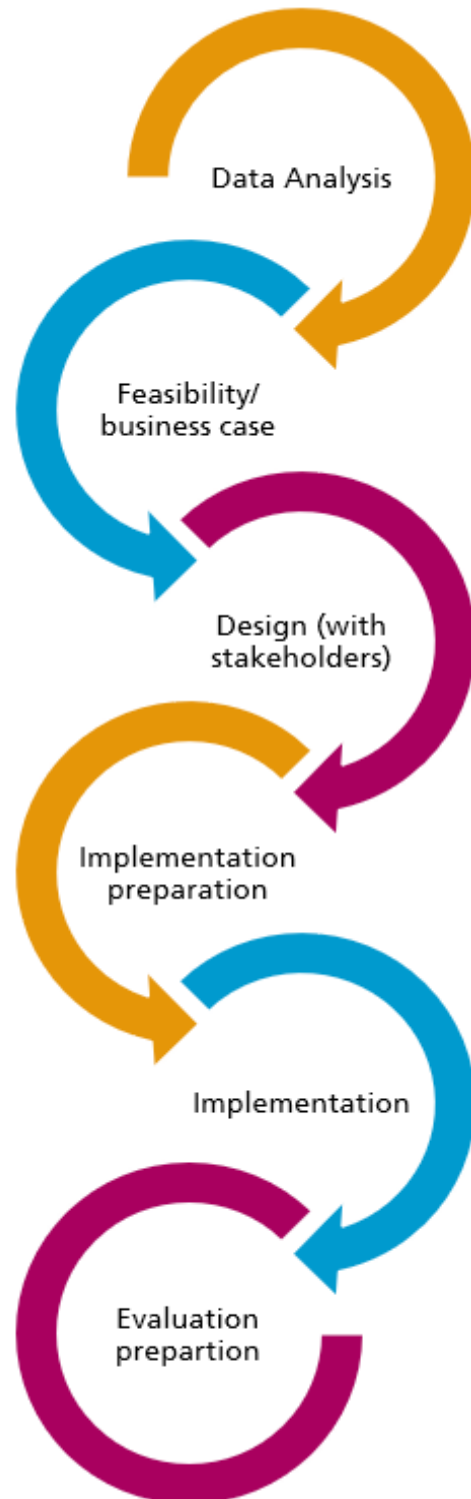
Key Aims

- Develop a portfolio role that can potentially increase the workforce resilience of Integrated Urgent Care Services
- Develop a role in which the GP can interface between urgent and acute healthcare services across health settings for the benefit of patients and the health system
- Enhance the function of the GP within urgent and acute secondary care teams such as Emergency Department (ED), Frailty and Paediatrics
- Enhance the general wellbeing, in particular the mental health of GPs
- Design an attractive job role that will support urgent and emergency care system-wide recruitment and retention

Key Stages of Set-up

Project 1 ran from January to September 2018. The project was designed and managed jointly by Dr Justin Geddes, CEO of Devon Doctors and Liz Edwards-Smith of Evalesco Consulting.

The project phases were as follows:



1) Data analysis

- a. Gather, analyse and validate local, regional and national evidence of rotational posts (across healthcare settings)
- b. Integrated Urgent Care Service demand profile/onward referrals to inform role rotations
- c. Financial analysis to establish impact of salaried roles on existing business model
- d. Gather, analyse GP input re: need/desire for portfolio roles (existing BMA, RCGP survey data)
- e. Soft test interest in role locally – focus group with ST3s / online survey

2) Feasibility / business case

- a. Develop high level feasibility paper / business case

3) Design (with stakeholders)

- a. Develop role/job outline, rotation options, level/grade of role
- b. Employment options (prime/honorary contracts; indemnity; salary)
- c. Funding arrangement for new role
- d. Agree induction, training, supervision, mentoring approach

4) Implementation preparation

- a. Develop recruitment strategy for new role (including writing an advert and selecting channels)

5) Implementation (actual recruitment to roles was out of scope for this project – responsibility for recruitment resided with Devon Doctors Director for Workforce)

6) Evaluation preparation

- a. Develop evaluation framework / approach to assess the extent to which the new role is achieving the aims and objectives of the pilot

Appendix 1 (Project Brief – Project 1) outlines the approach to the project and the deliverables.

Appendix 2 (Outline feasibility paper) provides the findings from each of the project phases.

How it Works

The project focused on developing relationships, establishing an evidence base that supported the development of a portfolio role, developing a portfolio role that would work across healthcare settings and producing deliverables that would enable Devon Doctors to recruit to portfolio positions.

The project built a case for change that recognised the need to think differently about how to attract and retain GPs in direct patient care. Using desktop research, the case for change was built from existing data from numerous sources including BMA GP surveys, King's Fund GP Trainee survey and University of Exeter Medical School's research papers. This clearly demonstrated that GP career intentions and attitudes toward work are changing and that traditional GP roles could not remain as the only viable career option. Appendices 2 and 4 outline the case for change.

The project then undertook a current state analysis which sought to understand what portfolio offers were already available to GPs. Informal conversations evidenced that mid-career GPs are building portfolios of work for themselves such as general practice work alongside specialist work (for example dermatology) or sessions working with the local Clinical Commissioning Group alongside out-of-hours shifts. There were also plenty of examples of fellowships which were typically 12 months duration rotational posts with an educational element. No evidence however could be found of a substantive portfolio role with a main employer that provided a portfolio opportunity across healthcare settings. The current state analysis also outlined some key lessons learnt from those who had developed fellowship opportunities. Appendices 2 and 4 provide details of the current state analysis.

Once the case for change and current state analysis had been completed the project team designed an outline portfolio role that would offer a GP the opportunity to work in general practice, in the Integrated Urgent Care Service, in an Acute Trust together with protected time for learning and peer support. This early design was tested with stakeholders in the local Acute Trust (Medical Director, Consultant Paediatrician, Consultant Geriatrician and Senior HR Manager) and was agreed in principle on the understanding that the detailed job description and job plan would need to be further developed.

The early design was also tested with ST3s in a focus group and by online survey. The focus group and online survey validated the early design and provided key insights into the future career intentions of local ST3s notably;

- 92% of respondents stated that portfolio work would be of interest
- The top three factors that make portfolio working attractive are; variety of work and opportunity, work life balance and flexibility
- None of the focus group participants (circa 20 ST3s) had the intention of working full time
- 83% of respondents favoured a substantive, salaried role with a main employer that provides a portfolio of work

The focus group and online survey demonstrated that future career intentions of GPs (if followed through) had the potential to negatively impact future GP capacity. It also showed that GPs are looking for different professional opportunities and portfolio working is one such opportunity and that a 'salaried' portfolio role that provides the opportunity to work within General Practice, the out-of-hours service and within an acute setting is an attractive proposition.

Appendices 2, 3 and 4 provide details of the early role design and the outputs from the focus group and online survey.

Following the early design and test of the portfolio role, the project team worked with the local Acute Trust stakeholders (Senior HR Manager and Consultant Geriatrician) to agree the role offer, the employment contract, the indemnity, the job description, the outline job plan, a salary model to ensure fair remuneration, an outline approach to induction and clinical supervision, and an approach to peer support. An outline recruitment strategy was also developed.

Once the project deliverables were in place Devon Doctors commenced recruitment to portfolio roles.

Resources

Project 1 was funded by Health Education England South West to develop a salaried GP portfolio role. Devon Doctors engaged external consultancy Evaluesco Consulting to jointly design and manage the project with them. The project engaged internal stakeholders within Devon Doctors (HR, Director of Operations, Medical Director, Director for Workforce) and external stakeholders at local Acute Trusts (Medical Director, Consultant Paediatrician, Consultant Geriatrician, Senior HR Manager) and within Primary Care.

Key Challenges

- Maintaining external stakeholder interest and focus when developing the portfolio roles. Persevere, do not underestimate the time required to engage stakeholders and the fact that you will need to have the same conversations a few times to get real commitment.
- Agreeing the salary for the role. Developing principles to guide the salary conversations and having a model that made the salary commitments for each stakeholder transparent really helped.

Key Learning

- Clinical leadership combined with management, Organisational Development (OD), HR expertise
- Early engagement, identify a sponsor that holds the funding
- Be transparent, be consistent, don't underestimate the time commitment
- Go where the need is
- Be flexible and tailor the roles / broker the offer – the initial portfolio offer was structured around the early design of the role but Devon Doctors are now far more flexible and will broker role opportunities depending on what potential candidates are looking for
- HR and recruitment team focused on portfolio working as a key element of the workforce strategy

Sustainability

Devon Doctors have embedded portfolio working into their workforce strategy to improve attraction and retention of clinicians within the Integrated Urgent Care Service. The HR team are focused on recruitment to portfolio roles and are starting to develop portfolio opportunities for Advanced Nurse Practitioners.



Next Steps

- Devon Doctors are continuing to recruit to GP portfolio roles
- Devon Doctors are starting to broker portfolio opportunities for Advanced Nurse Practitioners
- Completion of Project 2 – working with NHS Devon to explore the development of portfolio roles for pharmacists; working with Cornwall and the Isles of Scilly to explore how portfolio roles can be part of a system workforce strategy

Supporting Material

- Appendix 1 - Project Brief – Project 1
- Appendix 2 - Outline feasibility paper
- Appendix 3 - Data from ST3 online survey
- Appendix 4 - Developing Salaried GP Portfolio Role – Webinar slides

Relevant Websites

<https://devondoctors.co.uk/current-vacancies/portfolio-gp-ops-0091>

References

NHS (2019) Long Term Plan. Available at: <https://www.england.nhs.uk/long-term-plan/> (Accessed: 24 July 2019).

Royal College of General Practitioners (RCGP) (2016) Think GP. Available at: <https://www.rcgp.org.uk/thinkGP> (Accessed: 24 July 2019).

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