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## NHS ENGLAND – BOARD PAPER

### Title:

Expansion of the GP International Recruitment Programme Implementation Plan

### **Lead Director:**

Matthew Swindells, National Director: Operations and Information Rosamond Roughton, Director of NHS Commissioning

## **Purpose of Paper:**

To inform the Board of the actions being taken to expand the GP International Recruitment Programme, as set out in the enclosed Implementation Plan, published on 22 August 2017, to enable us to recruit, in total, an extra 2,000 overseas doctors over the next three years.

### The Board invited to:

Note the expansion of the GP International Recruitment Programme.

# **Expansion of the GP International Recruitment Programme Implementation Plan**

## **Purpose**

 This paper informs the Board of the actions being taken to expand the GP International Recruitment Programme, as set out in the Implementation Plan, published on 22 August 2017, to enable the recruitment of, in total, an extra 2,000 overseas doctors over the next three years.

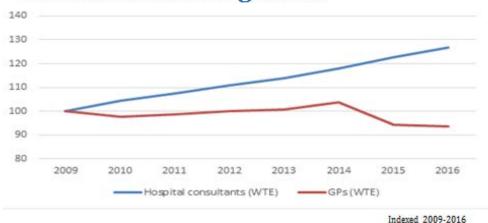
## Background

2. The Government has set out an ambition to double the rate of growth of doctors working in general practice, with an aim of securing an extra 5,000 doctors by the end of 2020. Health Education England (HEE) are leading on the work to increase the number of doctors going into general practice training, and in the *General Practice Forward View* we set out our plans to support this work with a focus on return to work, and retention, and supplementing this with a major international recruitment drive, to attract up to 500 appropriately trained and qualified doctors from overseas.

## Progress to date

- 3. Good improvements have been made to increase the numbers of doctors choosing training in general practice and to make it easier for GPs to return to work after a career break or working overseas. We expect that, over time, these changes will mean that we have a sustainable supply of UK-trained doctors into general practice.
- 4. However, many practices continue to face recruitment issues, and newly qualified GPs are often locuming rather joining a practice as a permanent GP. Some older GPS are leaving the profession early. We are also seeing more GPs work part-time clinically.
- 5. The number of GP vacancies reported via NHS Digital from 1 April 2015 to 31 March 2016 was 308. This was based on data provided by just 16% (1,246) of practices. We are working with the BMA to try to improve this data so as to better target help at the key geographical areas that need the most support. From 1 October 2017, practices will be required through the 2017/18 GP contract to allow collection of data relating to the NHS Digital Workforce Census.
- 6. There is a gap therefore between the number of doctors practices want, and the numbers they are successfully recruiting and retaining. This is in the context of years of higher growth in the consultant workforce than the GP workforce.

## Consultant vs GP growth



Note that from 2015, the data on GPs is not directly comparable with previous years owing to a change in the data source and methodology.

- 7. On 22 August 2017 we set out, together with Health Education England (HEE), the General Medical Council (GMC), the Royal College of GPs (RCGP), the British Medical Association (BMA), Local Medical Committees, NHS Employers and the Department of Health, our plan to partly bridge that gap through scaling up targeted international recruitment. This plan is attached at Annex A.
- 8. The plan sets out some important principles which we will apply to this programme, including the importance of patient safety, and the need to act ethically so that we do not damage other countries. It is also vital that UK trained doctors are not disadvantaged by this programme.
- 9. The key elements of the plan are:
  - accelerating the existing programme: on 22nd August we announced that we
    are approving proposals from across England for an extra 601 doctors to begin
    the recruitment process this financial year. This brings forward our recruitment
    plans by two years. This marks the formal start of our international recruitment
    programme, based on some initial small-scale test sites that began ahead of
    the main programme.
  - establishing a Framework Agreement of International Recruitment providers by 30 November: on 22nd August we also published an advertisement in the Official Journal of the European Union inviting expressions of interest from companies to support the recruitment and relocation of overseas doctors. We have analytical work underway to assess the key source countries with appropriate and adequate GP supply to focus our recruitment on. The key factors that are informing this are qualification and experience equivalence; the supply in country (based on absolute numbers of doctors); density (rates per population); English language and relative remuneration compared to the UK.
  - establishing a GP International Recruitment Office by the beginning of November to organise and run this scaled up international recruitment operation. The role of the Office will be to coordinate the recruitment, support for, and relocation of overseas doctors, working closely with regional and local colleagues and partner organisations. We are finalising the details of its

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functions, but these are likely to range from supplier recruitment; sequencing and managing the overall recruitment pipeline; coordination of the overall support for recruited doctors to visa application support and relocation and pastoral support.

- considering how we might recognise the qualifications and experience of non-EEA doctors: the Royal College of GPs, working with General Medical Council, will review the curriculum, training and assessment processes for GPs trained outside the EEA, beginning with Australia, to identify whether we can streamline the GP registration process for those doctors whose training is seen as equivalent to the UK GP programme.
- 10. Taken together, our intention is that these measures will enable us to recruit, in total, an extra 2,000 overseas doctors into English general practice over the next three years.
- 11. It is important to note that this international recruitment programme is different to international recruitment of other parts of the NHS workforce. There are many more providers, operating at a much smaller scale, often wanting only one new member of the workforce and this presents different challenges compared to a hospital looking to fill a range of posts. This is why the GP International Recruitment Office will have such an important role. It will need to do at scale some functions which might otherwise be done by large employers, whilst ensuring that it works closely with local teams and communities to secure employer commitment to recruitment.
- 12. We have also set up a new GP International Recruitment Advisory Board to oversee and support the design and implementation of the programme. The Board is chaired by NHS England and includes senior representatives from the RCGP, GMC, BMA, HEE, NHS Employers and the Department of Health.

### Recommendations

13. The Board is invited to note the expansion of the GP International Recruitment Programme and the details of the Implementation Plan.

Claire Aldiss, Head of Direct Commissioning Change Projects