
Primary care flexible staff pools in 2020/21

Making primary care a great place to work

This guidance is for Integrated Care Systems and Sustainability and Transformation Partnerships, Primary Care Networks, practices, Federations and other local partners to implement at pace this General Practice COVID Capacity Expansion Fund enabler

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Summary

Background:

This guidance sets out a newly-established arrangement to support the provision of flexible pools of engaged and employed GPs to deploy across local communities.

These arrangements reflect the People Plan commitment to establish GP banks, and replaces the Locum Support Scheme commitment made in [‘Update to the GP Contract Agreement 2020/21-2023/24’](#) for 2020/21.

The new, non-recurrent General Practice COVID Capacity Expansion Fund has been announced to support general practice through wave 2, as outlined in the [Supporting General Practice](#) letter of 9 November 2020. £150m has been allocated on a fair-shares basis to lead CCGs. Systems are encouraged to use the fund to stimulate the creation of additional salaried GP roles that are attractive to practices and locums alike. Capacity may also be garnered via the temporary employment of staff, or increasing the time commitment of existing salaried staff, who could be engaged and deployed via a flexible pool arrangement.

What is the initiative?

- Systems can receive up to £120k for the realisation of pools at pace to engage and deploy local GPs flexibly in an ongoing way to support local primary care, including PCN extended access services
- There is local autonomy to agree the exact delivery model and associated arrangements
- Where similar provision already exists, funding can be used to augment, expand or enhance what is already in place
- The pools can provide a mechanism for practices to use the Fund for extra salaried GP capacity until end March 2021. Yet the pools can continue after this time

- These pools will support groups of PCNs – most likely at CCG or place footprint - to increase capacity in general practice and create a new offer for local GPs wanting to work flexibly
- For GPs, pools can offer a flexible contract with connections to work opportunities

Funding:

Two elements of funding are associated with this activity:

- A) Up to £120k per system to support the development and running costs of a pool, available via NHSEI regions
- B) the General Practice COVID Capacity Expansion Fund (£150m) allocations, calculated on a weighted capitation basis and which have been made to lead CCGs

There are three optional enablers to support the pools:

- A) a flexible working GP contract template
- B) access to a digital supplier framework to support the deployment of staff to shifts
- C) peer support and networking

When does this launch?

- Systems should begin to develop their local offer **now**

What benefits are anticipated?

- **System:** reduced pressure on spend and improved access to a knowledgeable group of GPs, deployable to wherever the need is greatest
- **Practices and PCNs:** reduced burden in accessing temporary staff, and potential to build better relationships with pool members
- **GPs:** where a contract is offered, increased job security and access to the flexibility of a locuming role, with the additional benefits of a salaried position (including death in service)

Funding for 2020/21



The General Practice COVID Capacity Expansion Fund provides £150m to systems via CCGs for expanding general practice capacity up until the end of March 2021. The Fund is intended to support seven priority goals outlined in the '[Supporting General Practice](#)' letter, including to achieve an increase in overall GP numbers.

To enable systems to engage and deploy GPs at pace, financial support of up to £120k beyond the £150m will be made available to each STP/ICS. Exact funding values and release are agreed via a conversation with the respective NHSEI regional workforce colleague.

The exact design of the virtual pool arrangement is up to local discretion, and could be utilised to support one or both of:

- a) Employment of GPs on a flexible, (possibly part time) fixed-term basis to end March 2021. Salary and applicable employer NI/pension costs could be secured through the £150m Fund, with the GPs deployed to practices at no cost to the practice. In order for CCGs to reimburse salary and employer NI/pension costs through the Fund directly to the pool provider this pool arrangement would need to be delivered by a provider of primary medical services eligible for support under section 96 of the 2006 NHS Act
- b) Creation of a 'matching service' to link flexible GPs to practice need. Practices can seek reimbursement from their CCG for the salary costs of engaging a GP from the pool

In both instances the £120k funding can be used for creating and administering a virtual pool, or enhancing an existing pool arrangement, including ensuring a full geographic coverage. The £120k can be utilised in a number of ways including for staff to administer the pool, digital supplier requirements, and the delivery of the peer support and networking activities.

Local agreement can be made in relation to GP rates of pay. It is recommended locums are paid in line with eDec maximum indicative rates of £77.57 per hour / £323.21 per session.

The pool should support the local infrastructure through COVID and afterward, and so systems should plan to have access to a smaller budget for maintenance of a pool arrangement next year and possibly beyond.

CCEF	<ul style="list-style-type: none">• £150m allocated to systems via lead CCGs on a non-recurrent basis to support general practice capacity through wave 2 of COVID to end March 2021• Subject to the wider criteria for the Fund, and statutory provisions on payment, can be utilised for salary and applicable employer NI/pension costs of GPs engaged through the pool
Pools	<ul style="list-style-type: none">• Up to £120k per system via NHSEI regions for the delivery of a mechanism to recruit and deploy GPs• Funding should also be utilised to deliver peer networking for GPs engaged via the pool, as well as any digital solution required

Flexible pool delivery



The initiative comprises two core aspects, which each system is encouraged to put into place or augment locally; and supported by three complementary, optional enablers:

Core aspects	Summary
1 Establishing flexible pool to support general practice	Systems have access to up to £120k to support the development/ implementation and running costs of local pools until March 2021. Consideration should be paid to any existing provision, and ensuring geographic coverage.
2 Connection to work opportunities	In delivery of pools, systems and their constituent places are invited to connect flexible GPs with available general practice shifts within their footprint. Consideration should be paid to the optimum way GPs engaged through the pool can be deployed.

Optional enablers	Summary
A Digital Supplier Framework	The framework contains a list of approved digital suppliers whose digital solutions can provide increased support to local systems in deploying their additional sessional and flexible clinical capacity.
B Template contract for engaging GPs to the pool on a fixed-term basis	GPs engaged through local pool should be offered a contract until end March 2021, which is flexible to suit the needs and preferences of the GP - either in terms of location, type of work, number of shifts or time of day worked. An optional contract template is supplied which can be adopted and adapted by the respective pool to engage GPs.
C Peer support	A pool represents an opportunity for systems to provide greater peer support and networking opportunities for GPs working on a flexible or sessional basis. Support can be particularly important when working in a flexible or mobile way. This aspect can be delivered in a remote way to respect social distancing.

1 Establishing pools



Systems are encouraged to use their funding to develop a set of virtual pools which could both employ GPs with flexible contracts, and engage local GPs who can deliver additional sessions; and connect them with practices holding vacant shifts. Local agreement will need to be made in relation to who hosts the pool and therefore holds the contracts with the GPs, and other associated liabilities. It is anticipated that pools will in most cases operate at the 'place' level of a system.

In some areas a pool arrangement, or similar such as a workforce bureau, will already exist and may be grown or augmented to be utilised to support general practice capacity. Each area holds the autonomy to decide what arrangement works best for their existing environment, but this must include GPs. The local arrangement should be agreed and implemented at pace in order to support COVID wave 2, yet should be sustainable with a view to remaining part of the local landscape post-March 2021.

The local pool structure should seek to support the following responsibilities:

- Onboarding of GPs to the pool
- Conduct verification and other pre-employment checks on GPs registered e.g. identity, CCT qualification, indemnity, occupational health, performers list, GMC, employment history, DBS check
- Able to facilitate and connect GPs to take on work at practices with vacant shifts. This deployment may be activated through utilising a technology solution
- Have the capability to enter into a contract or Terms of Engagement with GPs
- Support GPs working on a more flexible basis to become well-engaged members of the local workforce
- Supporting induction to the local environment by ensuring each practice serviced by this pool holds a 'information pack', supporting the GP to quickly adapt to a new environment
- Tracking of number of GPs enrolled and sessions delivered by GPs engaged through the pool
- Be responsible for oversight and administration required in running the pool

There is a sheet at the back of this document which lists some of the operational considerations you may wish to make when establishing these arrangements.

"...(NHSEI) will encourage GP practices and primary care networks to offer more flexible roles to salaried GPs and support the establishment of banks of GPs working flexibly in local systems." NHS People Plan, p.21

2 Connecting to work opportunities



A mechanism should be agreed in order to match and deploy flexible GPs to practice need. In the early development phase, this could exist as a register of local GPs and practices, where connections to work are made in a manual way, progressing to being digitally-based in due course, perhaps taking advantage of the supplier framework to secure a solution.

Funding from the £120k available can be utilised for the costs of managing this aspect of the arrangements – whether that be staff time to administer and oversee the running of the pool activity, and/or to procure a digital mechanism such as an app to match and deploy GPs to shifts.

There is information on the next sheet of this pack detailing how you can connect with a digital provider to secure a deployment app for your area.

As an optional enabler to the pool, a Framework of approved suppliers will be published in January 2021 which will offer further support to local systems in deploying their workforce. The use of digital solutions can improve the visibility of capacity and demand through the posting of shifts by practices/PCNs and is intended to provide local systems, CCGs and PCNs with a more easily available solution to deploy as they seek to match sessional capacity to need.

Call-off by a commissioner or by commissioners working together at system level, will streamline the deployment of the primary care workforce, creating flexibility which meets the needs of local areas. Practices will be able to post sessions available in their practice, with sessional or flexible clinicians able to easily indicate their availability and select shifts that suit them via each digital solution.

The initial focus for these digital solutions is on the deployment of sessional and flexible working GPs, however commissioners and local systems may consider using these products to support the deployment of other roles such as clinical pharmacists, practice nurses and roles covered by the PCN Additional Roles Reimbursement Scheme in the future.

Digital solutions should also significantly reduce administrative requirements for both sessional clinicians and practices, and support implementation of pooled arrangements. Local systems, working closely with their practices, will be responsible for selecting the digital supplier they wish to call off the Framework.

Expected benefits of using digital suppliers include:

- Increased CCG confidence in the management of increased primary care demand
- Improved service to manage demand in the system
- Improved health and wellbeing of staff and increasing resilience of general practice
- Increased public confidence and enhanced health and wellbeing of patients resulting from sustainability of services and improved access

Costs to purchase a digital deployment solution:

Costs for local systems will depend on the digital supplier selected. All digital suppliers will explicitly set out their upfront fees, recurrent fixed fees or sessional fees prior to being awarded a place on the Framework. Cost may vary depending on a number of factors; the CCG population size, the number of practices onboarded onto the solution and the number of sessions filled by GPs/other roles. CCGs will be able to access this information through the call-off guidance. Systems may consider using their pump-prime funding to support the cost of calling off this Framework to support local implementation.

How to call-off the Framework:

A call-off guidance including information on how to call-off from the contract, a step by step guide, and frequently asked questions is available upon request by emailing: digitalsupplier.framework@nhs.net

B Template contract for engaging GPs to the pool



An optional template contract is supplied by NHSEI for flexible GPs to be employed via the pool. The contract is a skeleton template which systems can adapt in order the associated terms and conditions suit their local context and need.

The template contract is available to download from the FutureNHS platform [here](#). You will need access to the site, and it will take just a few minutes to create a username and password if you haven't visited the platform before.

The contract is intended for short-term use until the end of March 2021, and any GP employed after this time should normally be employed using the [BMA Salaried GP Model Contract](#).

C Peer support

Common feedback from our flexible working, sessional and locum GPs can be that they feel isolated because they may not be as well engaged with practice and PCN colleagues as they would like to be. In order to support flexible GPs to form closer professional links with others working in the same area, pool leads are encouraged to establish peer support and networking mechanisms for their GPs, and consider how they can link into other system/place clinical forums.

Through investing in building supportive relationships in this way we build resilience and strength into our workforce, and support people to feel an important, integral and valued member of a community.

Systems are encouraged to consider what peer support activities are already underway in their area, and build where these do not exist already for this specific cohort. This aspect can be delivered through one or a range of approaches including:

- Peer-to-peer coaching/mentoring
- WhatsApp/ social media forums
- Networking sessions
- Action Learning Sets

You can view good practice examples in the [GP Retention Toolkit](#).

Pool evaluation



The initiative will be kept under review, with guidance updated as required to ensure it remains as effective as possible.

As outlined in the Supporting General Practice letter, accessing the Fund will be conditional on full completion of national appointment and workforce data. In addition to this, NHSEI require management information in order to understand impact of pools and return on investment, and to inform the ongoing review of the support offer to the workforce. This will be gathered via a single collection at the end of the financial year.

As they get underway, we are particularly interested in any intel on how the pools are being utilised in order we can continue to build ways in which GPs can be supported to work flexibly. Should you wish to share any case studies or good practice examples please connect with us through the details on the following slide.

The box below outlines the metrics which updates will be sought against, in order ICSs/STPs and their delivery partner(s) can start to capture this information from the outset as they implement their pools. It is the intention that the quantitative metrics from this list will be added to the Primary Care Monitoring Survey in the new year.

A process should be put in place locally to monitor and evaluate pools in an ongoing way, both in terms of numbers of GPs supported, and understanding their experiences of the pool.

- **Date pool went live**
- **Number of GPs registered to the pool**
- **Number of hours GPs are contracted for**
- **Types of GP engaged through the pool e.g. salaried, locums, partners, emergency returners**
- **Amount of spend against £120k funding**

Where to go for support



FutureNHS

This website from the primary care workforce team in NHS England and NHS Improvement offers further resources including workforce modelling tools and retention guidance and support. There is also a community of others leading this programme locally, so you can use the forum to ask questions and learn from other areas.



National Policy Team

The team who developed this guidance can be contacted at england.primarycareworkforce@nhs.net

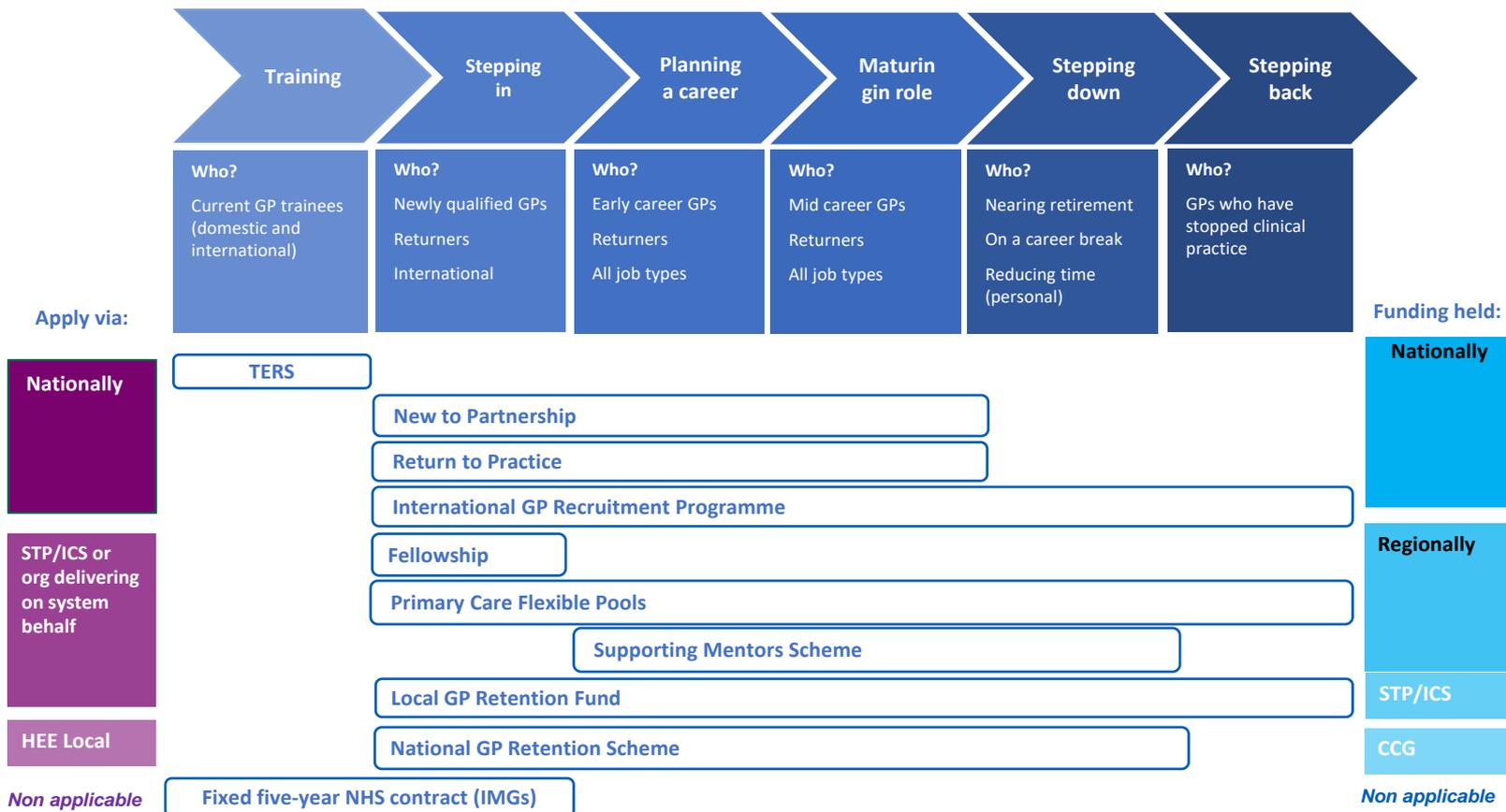


NHSEI regional colleagues

You can gain support from your local NHS England and NHS Improvement regional colleagues. Additionally they are your point of contact for the release of funding for the implementation and ongoing delivery of your pool

A view of further support for the GP workforce is set out in the next slide. We continue to support local systems to implement the expanded GP recruitment and retention offer and promote available support through our networks. Practices and PCNs are encouraged to consider how they can **promote and encourage** take-up of available support among their teams.

Annex: NHSEI Interlocking GP recruitment and retention initiatives



An enhanced package of support for **GP recruitment and retention** was announced in February 2020. As an interlocking package, the schemes aim to provide GPs with targeted support at different points of their career pathway – recognising the complex factors influencing current loss from the workforce.

These schemes add to the existing support offer for colleagues in primary care - including support for health and wellbeing. Find out more at www.england.nhs.uk/gp/the-best-place-to-work and <https://people.nhs.uk>.

Annex: pool operational considerations



Establishing a virtual pool arrangement provides a mechanism to use the COVID Capacity Expansion to Fund to develop local capacity. These arrangements are initially to run to end March 2021 to support winter pressures and vaccinations, and so processes should seek to be as low bureaucracy as possible. Some operational considerations are listed in the table below to assist with local planning conversations in the instance the pool employs the GPs.

Consideration	Further detail
Integration and relationships	Consideration should be paid to seeking, assessing and securing the optimal local organisation to deliver the pool, and agreement on remaining engaged in delivery of it.
Contracting with delivery organisation	A formal agreement between the CCG and delivery organisation will be required, such as an MoU.
Coverage	All practices should be encouraged to be attached to a pool. Systems should aim to establish full coverage as soon as possible.
Supervision	Whilst qualified GPs may not usually experience a regular supervision conversation, there may be an occasional need. This should be agreed between the employer and the GP.
Procedures and documentation	Policies and procedures will need to be put in place covering such employment issues as grievance and disciplinary.
Mentorship	To support the flexible nature of their role and as they work across differing practices, each GP engaged though the pool could benefit from a single consistent mentor.
Onboarding and employment checks	Appropriate pre-employment checks plus induction and onboarding activities should be a function of the pool, and so you will want to agree this process and where the information is stored.
Indemnity and staff sharing agreements	GPs should be covered by the CNSGP provided the practice is permitting the sessional GP to deliver service on its behalf. A staff sharing agreement between practices and the host employer make this arrangement robust.
IT provision	Given a principle of the pool is to support GPs to work flexibly, IT agreements will need to be secured that support remote working, and working at different sites. Where does the responsibility sit for IT hardware/ software costs, as well as IT maintenance and helplines?
Risk – financial and employment	Whilst the costs for salaries could be covered in 2020/21 through the £150m COVID Capacity Expansion Fund, consideration should be paid to hosting flexible posts after the end of March 2021.