**NHS Education for Scotland**

**Equality Impact Assessment Report**

**Title of Educational Programme:**

The Scotland GP Returner Programme / The Scotland Enhanced Induction Programme.

Details can be found at: <http://www.nes.scot.nhs.uk/gp-return-induction>

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1. **The aims of the programme.**

The aims of the Returner Programme are to:

1. Provide a supportive and clinically relevant educational environment in which GPs, who have previously worked in NHS GP, can refresh and update their clinical skills

1. Provide a formative assessment for the GP during the practice attachment
2. Provide a clinical reference through an Educational Review Document (ERD) supported by evidence to those managing the Performer List
3. Enable GPs who are committed to live and work in Scotland, to return to the GP work force.

The aims of the Enhanced Induction Programme are to:

1. Provide a supportive and clinically relevant educational environment in which GPs who have never worked in NHS GP before can acquire a working knowledge of the NHS, are both clinically safe and able to practice in accordance with the values of the NHS, and are comfortable managing patients’ expectations across the broad curriculum of general practice.
2. Provide a formative assessment for the GP during the practice attachment.
3. Provide a clinical recommendation through an Educational Review Report, supported by evidence, to those managing the Performer List.
4. Enable GPs, who are committed to live and work in Scotland, to join the GP work force.

The GP Returner Programme benefits GPs who have previously worked in NHS GP, who have taken a career break, commonly to raise a family or following premature retirement, and who wish to return to clinical practice but who are apprehensive of recent advances, changes and innovations and who lack the confidence to return without mentoring and support.

The GP Enhanced Induction programme benefits GPs who have never worked in NHS GP but who have a long term commitment to live and work in Scotland. The programme provides an opportunity to practice within a different health care system to that within which they have trained, previously worked and are familiar, with particular reference to cultural, ethical, organisational, clinical and system differences.

These programmes benefit Medical Directors with responsibility for Performers’ Lists in Scotland by providing a reliable work place based assessment to inform suitability for unconditional inclusion on the Performers List as independent practitioners.

The intended outcome is to provide a reliable, contemporary clinical reference.

In addition, these programmes benefit patients by encouraging and ensuring competent GPs return to General Practice in Scotland.

1. **NES’s role in delivering the programme.**

NES’s role is to establish the eligibility and suitability of the doctor to be offered a funded place on one or other of these programmes, to manage, through its network of GMC approved trainers, a practice attachment and workplace based assessments, to ensure a summative outcome is decided and communicated to Health Boards in order to support the latter’s decision to agree or reject inclusion on their Performers’ Lists.

NES employs these doctors for the duration of their programme and would therefore be responsible for funding reasonable adjustments for disabled doctors should such funding be required.

To be eligible for the Enhanced Induction Programme, the applicant must successfully complete national assessments which are organised and managed through the GP National Recruitment Office. The NES GP Advisor is responsible for facilitating arrangements, liaising with the NRO and managing outcome through either inclusion on the programme or career advice.

1. **The expected scope and duration of the programme.**

Historically, approximately 5-6 GP Returners have been included in a similar programme per annum in Scotland. There has been no funding in Scotland to support doctors who have never worked in NHS GP before. It is this latter group for whom the Scotland Enhanced Induction programme has been designed which involves UK entry assessments managed through the National Recruitment Office. The size of the audience is unknown as steps are being taken to promote these programmes more actively both in the UK and abroad to encourage doctors to return from career breaks and from working abroad. We welcome those who have never worked in NHS GP before – the GP Enhanced Induction programme is aligned to that offered in England to ensure a consistent standard is applied for this group across the UK.

Funding is being provided by Scottish Government. This initiative is to be welcome in an effort to encourage already well trained GPs back into the Scottish GP workforce. The programme is dependent on sustainable funding. The economic case to support investment in a GP Returner Programme is described in Br J Gen Prac 2014 Jan: 64(618): 46-47 GP Induction and refresher and retainer schemes: are they cost effective? Harris M, Morison J, Main P.

**4. The relevance of equality to these programmes.**

* These programmes are available to all GMC registered GPs who have a licence to practice and who have a long term commitment to live and work in Scotland.
* A survey that we commissioned and carried out by an independent company known as Wild Heather Research, identified those most likely to return are those who have chosen to take a career break to bring up young families, those who have left to work abroad but who want to return home to care for elderly relatives and those who have retired prematurely and miss clinical practice. There is no limit in terms of eligibility, to time out of practice, gender, disability or age.
* These programmes have been designed to provide induction and training which meets the needs of the individuals. The group of doctors accessing these programmes are diverse – by taking a more individual approach to induction and training we can insure that the programme is suitable and inclusive.
* Experience in Scotland and in a similar programme in England suggests that the educational needs of new or returning licensed GPs will vary depending on whether or not they have past experience of working in NHS General Practice.
* Ismail and Roberts’ research for the GMC on the differential outcomes for internationally qualified doctors on the CSA concluded that differences in the structure of primary and secondary health care meant that internationally qualified doctors were likely to have different learning needs. It would not be unreasonable to relate this to GPs who have been working out with NHS GP.
* For these reasons, the programmes offered are different – the GP Returner Programme being specifically for those who have previously worked in NHS GP and the GP Enhanced Induction programme for those with no NHS GP experience.
* Differences between the programmes are based on previous work experience rather than country of qualification. These programmes are designed to support all doctors who are acknowledged as having completed GPST or equivalent to the same end point which is an assessment made by the educational supervisor that they have reached the standard for independent practice.
* The length of time on the programme is determined mutually, after a formal semi-structured interview and will be up to a maximum of six months or equivalent part-time.
* The programmes have been designed to ensure that GPs can access education which is relevant to their needs, regardless of their ethnicity, national origin, gender, age, disability or other factors. Individual assessment of learning need will inform development of the specific programme.
* Clear communication about the aims and content of the programme to the target audiences will be important to support good relations and equality of opportunity.
* The summative assessments are appropriate mechanisms for ensuring that the GP can practice safely in NHSS. Both routes ensure that doctors undergo the same assessments, although they carry them out at different points in the programme.
* NES is the employer of these doctors and has access to several hundred GMC approved training practices. NES is therefore able to accommodate those with disabilities and will provide necessary adaptations as recommended by our Occupational Health advisors.
* This EQIA has taken into account the UK Equality Act 2010.
* All NES GP Educational Supervisors have had Equality and Diversity Training which is refreshed three yearly.
1. **Monitoring and Review**

* Once numbers are sufficient, an evaluation of the success of both programmes will be undertaken. The evaluation will include analysis of outcomes for those with protected characteristics.
* There are regular monitoring meetings with Scottish Government.
1. **Equality Related Risks**
2. Inconsistency in Management across Health Board Areas

Currently, Scotland has fourteen different performers lists. To mitigate against inconsistencies in how these doctors are managed we:

* Developed and manage a website that includes information and resources relevant to both programmes.
* There are regular meetings with Health Board representatives to ensure consistency in how doctors applying to join Performers Lists are managed.
* There is an intention by Scottish Government to have only one Performers List for Scotland which will help make decisions more equitable and consistent.
1. Inconsistency in Management across NES regions
* Regional GP Advisors meet every two months to ensure equity in management and to discuss individual cases.
1. Programme Differences
* We acknowledge there are differences between the two programmes but the appropriate programme selected for any individual is determined by previous experience and knowledge of working in NHS GP.

**7. Evaluation and Reporting**

* The evaluation will include demographic data that is collected on appointment including protected characteristics.
* An Educational Fellow will conduct individual and group interviews of both participants on the programmes, their supervisors and other stakeholder groups.

These results will be widely disseminated and presented to Scottish Government and relevant NES committees.

This EQIA is available on the NES website <http://www.nes.scot.nhs.uk/education-and-training/by-discipline/medicine/general-practice/gp-induction-and-returners-programme.aspx>