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**Dear Colleague** 

## **OUT OF HOURS TRAINING FOR GP REGISTRARS**

This letter is to draw your attention to continuing CCG and OOH provider responsibilities with regard to GP specialty training registrars (GPSTRs) training in out of hours care since the April 2013 reorganisation of the NHS.

It is also intended to inform stakeholders of the on-going expansion of recruitment in England for GP specialty training from 2800 in 2012 to 3250 in August 2015; an increase of 450 trainees across England. Following this expansion, there will need to be an increase in capacity for OOH training of around 16%. Therefore this decision has already been taken by DH Ministers, reference Mandate to Health Education England. This letter does not give rise to any new costs.

## Action

ATs/CCGs will need to discuss with their local LETB both the current and the anticipated <u>increase</u> in OOH opportunities that are needed for GPSTRs and to take measures to ensure they can be delivered through arrangements currently in place with OOH providers.

It is expected that the forecasted training capacity will be reflected in future tendering and contract arrangements between commissioners and OOH providers.

## Background

In 2004, the Committee of General Practice Education Directors (COGPED) wrote a position paper setting out how GPSTRs are to continue to receive training in OOH care where their training practice has opted-out. This paper was updated in 2007 and again in 2010. It can be found at:

http://www.cogped.org.uk/page.php?id=199

This makes clear that OOH providers must provide adequate training sessions for local GPSTRs supervised by LETB trained and approved OOH clinical supervisors.

The Department also circulated a letter in April 2004 and 2009 (Gateway Refs: 3073 and 13196) detailing the responsibilities of PCTs, GP Postgraduate Deaneries and *High quality care for all, now and for future generations* 



GP Trainers to provide OOH training. In summary, these continue for successor organisations.

Therefore:

LETBs should:

• identify the training opportunities required in their area and discuss with ATs/CCGs how those opportunities can be made available;

- fund and support training for clinical supervisors;
- quality assure the provision of GPSTR training by OOH providers.

## GP Trainers should:

• help LETBs and ATs/CCGs identify the training opportunities required;

• arrange placements for their GPSTRs with approved OOH providers. While training in the OOH provider, GPSTRs will work under their normal contract of employment with their GP Trainer. They will not be entitled to any remuneration from the OOH provider itself.

CCGs/ATs should:

• discuss with LETBs and GP Trainers what training opportunities are required;

• discuss and agree with their OOH providers how those training opportunities can be provided, ensuring that anticipated training capacity is included in contract specifications;

Where one CCG is commissioning OOH services on behalf of other CCGs, it may make sense for it also to lead on discussions with LETBs. Where two or more CCGs are commissioning OOH services from the same provider, they may wish to work jointly to agree arrangements for GPSTR training.

Thank you for your help with this important matter.

Yours sincerely,

Mike Benik.

Mike Bewick Regional Medical Director (North)

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NHS England.

Cc AT Directors, LETB Directors of Education and Quality & Postgraduate GP Deans. CCG Accountable Officers