**Somerset GP Board**

**Network Clinical Directors: A New Role in Primary Care**

***Why should I consider taking on this job?***

The 2019 GP Contract is radical in several ways, perhaps most notably in formalising the development of GP federations and locality groups into Primary Care Networks (PCNs). It is now widely accepted that encouraging practices to work collaboratively has many potential benefits, particularly including greater resilience and the opportunity to bring services together into a Neighbourhood structure.

The key to success in this will be local leadership. The pieces of the network jigsaw are being collected, but somebody needs to supervise putting them together. It’s an intriguing and potentially very satisfying task, but we know everyone is already very busy with both clinical work and other tasks ranging from strategic planning on ICO development to LMC pastoral support for colleagues.

We think that the Network Clinical Director (CD) role is distinct and different to anything else. Most importantly, GP Network development cannot really proceed without good leadership, so in the next couple of months we need to recruit 12 clinicians prepared to devote about a day a week to this job. We recognise that this is quite a big ask, so the offer comes with significant support:

* Work is underway to find funding for clerical/admin help for each CD
* Initial and ongoing training as specified below
* A support package including peer group meetings and mentoring if required
* It can be an incremental role – you can start with just one or two things to begin with and build up from there.
* The initial engagement is for 12months, so if it turns out this is not the right job for you; you can leave then without causing any disruption.

Job descriptions usually contain lots of flowery language about “exciting opportunities”, but for once we think this is true. This is genuinely a chance to help design the future pattern of general practice in your locality using the skills you already have as a front line primary care clinician: good communication, helping people reach the right decision, reducing complex material to individual decision steps and applying emotional intelligence to sometimes difficult relationships

There are no specific requirements for the role in the contract other than that the person must be proposed by the relevant Network. However, our understanding is that in this context “Clinical” means that the person must be a registered health professional.

***What will the job involve?***

 According to the 2019 GP contract, the job role of Clinical Director for a Primary Care Network will include:

* Providing strategic and clinical leadership to the network
* Developing and implementing strategic plans
* Leading quality improvement work amongst member practices (including QoF)
* Developing relationships within the network to improve patient outcomes
* Leading on workforce development, including skill-mix
* Working with member practices, other primary care providers and commissioners to implement improvement schemes in-line with local and national priorities
* Working closely with the other CDs and clinical leaders in other providers. Local commissioners and the LMC
* Encouraging the network to participate in research
* Representing the network at CCG and STP meetings and contributing to the development of the ICS.

Although the role is described as “accountable” quite what this means is not explained in the GP contract, though this says that the CD will not be solely responsible for the operational delivery of services as this is “also a collective responsibility of the network”. We do not at present have details about just what the Clinical Directors themselves will be responsible for, but doubtless the role will evolve with some of the functions mentioned becoming more important and others less so.

There is funding in the contract for a 0.25 WTE post per 50,000 patients. It is likely that the Somerset Primary Care Networks will vary in size from close to 30,000 patients to slightly over 50,000 patients but we hope that the funding arrangements can be adjusted , recognising that the CDs will all have a similar workload. Discussions have begun with the CCG and STP about whether additional funds can be made available to increase the Clinical Director role from 0.25 whole time equivalent (roughly one and bit days per week) to 0.4WTE (roughly two days). These discussions are ongoing. However, PCNs will want to consider the needs of their network and also the amount of time available from their preferred Clinical Director. It is important that PCNs decide what works best for them rather than a single solution being arrived at for the whole county. The £1.50 per patient network development funding that will be available from July is a possible source of funds for increased Clinical Director time. It will be for PCNs to decide themselves how they use that funding.

The GP Board believes that in Somerset the Clinical Director job role is likely to have a local focus on some of the following:

* To lead on establishing the job role of PCNCD in the emerging structure for health and social care in Somerset
* Liaise with the potential member organisations of evolving neighbourhoods and other interested parties, including, but not limited to, NHS & Social Care commissioners and providers, voluntary and community organisations and relevant private companies.
* Working with internal and external managers and experts to progress development plans.
* Attending and leading Primary Care Network member meetings and consulting with practice representatives and other important participants to maintain the impetus of projects.
* Ensuring the needs of patients and clinical priorities are always considered in group decision making.
* Leading the formation of a broad policy consensus in the network.
* Maintaining regular and effective communication amongst members and between members and other interested parties.
* Respond to questions and concerns from colleagues working within the network.
* Work with clinical leaders, local commissioners, and change experts to maintain cohesion between networks, neighbourhoods and a county-wide strategic approach to change.
* Developing a QI network to test and share improvements and innovations.
* Be answerable to a suitably constituted representative meeting of the GP Network members.
* Work with the other CDs and other bodies to help co-ordinate relationships between member practices and the rest of the health and care system in Somerset

**Remuneration**

The basic population based payment is calculated using a baseline equivalent of 0.25 WTE (1 WTE is £137,516 in 2019/20) per 50,000 registered population size as at 1 January 2019. This is a payment of £0.51430 per registered patient for the period 1 July 2019 to 31 March 2020 (which equates to £0.057 per patient per month), reflecting the fact that the Network Contract DES begins in July and this will be the point at which the Clinical Director takes up the post. The payment will start from July 2019 and is payable on a monthly basis by commissioners, no later than the last day of the month in which the payment applies and taking into account local payment arrangements.

**Support, training and mentoring**

Clinical Directors will be offered mentoring & support, particularly if they do not have previous experience of this kind of work. There will be a comprehensive support package made available to all post holders.

***What skills will I need to have or acquire?***

To hold the position of Clinical Director in a Somerset Primary Care Network you must be a registered healthcare professional. The most important personal attribute for the role is an enthusiastic and positive approach to the challenges of healthcare transformation in Somerset.

Clinical Directors should:

* Have an established association with a provider that is part of the proposed network structure
* Have, or be able to acquire, the confidence of the main body of network members
* Be available for the time commitment required
* Be prepared to work flexibly to meet the needs of projects, including attendance at training events and strategic planning meetings with leaders from other networks
* Have a clear and keen interest in the network area they represent, showing knowledge and understanding of the needs of the area it covers and the healthcare system that operates within it
* Possess excellent communication and negotiation skills or be willing to rapidly develop these with support and training
* Possess excellent organisational skills and the ability to prioritise their available time most appropriately.

Clearly, nobody is going to be able to tackle the whole scope of the role from a standing start, so we anticipate the actual job will start with a few tasks and evolve its own priorities over time.

***What Help & Support will I get?***

Each CD will need significant and continuing input and support from both a team of colleagues inside the Network and also a range of individuals and organisations across the county. The Somerset General Practice Board has worked with partners in the CCG and Somerset Training Hub to confirm the following package of support.

**Somerset CCG support**

Somerset CCG has confirmed that Clinical Directors will be provided with support to develop their Leadership Skills, looking at change management, relationship development, team and individual coaching, conflict management and cultural organisational development. This support will be provided through the Wellbeing Collective and delivered to all 12 appointed Clinical Directors though workshops over a number of sessions. In addition, action learning sets and mentoring will be developed to support the Clinical Directors in further developing their skills and sharing learning.

The full programme for the course will be provided to all Clinical Directors.

**Skills Development**

The CCG has agreed to fund a one-day event for Clinical Director candidates to help them understand more about the skills required and meet key colleagues from organisations across the system. Where there is more than once candidate in a PCN area for the Clinical Director role, the outputs from this day will help the PCN to select its Clinical Director. The GP Board will also assist in this case. Further details will be available soon.

**Somerset Training Hub Support**

Somerset Training Hub believes that a PCN’s main asset is its workforce and works to maximise its benefits through education and workforce development. It is keen and committed to providing each Clinical Director with a range of support and will use education meetings to:

* Enable local primary care individuals, teams and providers to learn together across professional and organisational boundaries and so improve relationships, encourage new ways of working and address shared health priorities
* Provide PCN workforce with increased access to training in Quality Improvement, Leadership, Research and Team-working
* Encourage and support the locality’s existing educators in becoming able to plan and deliver the PCNs own multi-professional education programme
* Enhance professional wellbeing, job satisfaction and workforce retention
* Up-skill the existing workforce and embed and support new roles.

STH will co-ordinate training and support for Network Clinical Directors.

***How do I apply and what happens then?***

Although the contract is clear that PCN Clinical Leaders should be identified by networks themselves, the CCG will legitimately want reassurance that the candidate is an appropriate person to fill the post, and it is logistically sensible for the technicalities to be handled centrally by the GP Board.

The suggested process is therefore

1. Interested clinicians should initially speak to their PCN/ Federation Chair, or other senior local colleagues if there is no active Federation in the area to confirm there is support for their candidacy before notifying the GP Board of their interest in the role.
2. The GP Board will liaise with the HR Department at the CCG to confirm applicants’ professional registration and undertake any other necessary background checks.
3. If more than one clinician is interested in the post, the PCN can either make a choice and put one candidate forward, or it can ask the GP Board to undertake a formal selection process on its behalf.
*(****NOTE****: It is recommended that the formal selection process is undertaken as it is likely to be less contentious if the decision is made outside the Network. Having specific HR expertise on the panel will ensure that all the HR processes are managed properly.)*
4. Proposed Clinical Directors are invited for an assurance interview
5. The interview panel is made up of a SGPB member (who must be ratified by the LMC), two PCN representatives, & the CCG Associate Director for Human Resources.
6. Interview questions will focus on how the person will develop the role & represent their PCN effectively and allow for any extenuating circumstances to be raised
7. The Interview panel confirms that the potential CD is suitable
8. The PCN makes a final decision.

***What do I do next?***

**For more information:**

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