



# Employing a New to Practice GP

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Guidance and support from the  
**Phoenix Programme**





# New to Practice GPs

## The current situation

The NHS has been working to increase the number of medical students interested in a career in primary care, as one of the many ways in which it is trying to address workforce shortages for GPs. The Phoenix Programme offers targeted support for both New to Practice GPs and the more established GPs that they work with, to ease their transition into primary care.

## Why employ a new to practice GP?

New to practice GPs bring the latest training and knowledge into the practices employing them. They are often enthusiastic about the opportunity to support patients and families, offering continuity of care and feeling that primary care, particularly where it addresses the wider determinants of health, “aligns with [their]values.” Evaluations conducted by the Phoenix Programme and by NATH show considerable enthusiasm for teaching, research, service improvement, and most importantly for the opportunities that primary care offers to support patients early and holistically.

## Do new to practice GPs need additional support, compared to more experienced colleagues?

New to practice GPs may require more support and supervision when they begin to work as independent practitioners. The government started the First5 programme to support them on the acknowledgment that moving from the close support of the training system to fully independent practice as a GP can feel like “*falling off a cliff*” [1]. This is usually a short term transition issue. Evaluations conducted by Phoenix, and previously by NATH, found that many people who received support with transition rapidly overcame the feeling of being “daunted” and rose to being GP mentors, contributing to system level change and running major primary care projects far earlier in their career than they thought they ever could.

[1] Taylor, Parsons, Sparrow and Gerada (2011) The First5 Concept British Journal of General Practice 2011; 61 (582): 72-73. DOI: <https://doi.org/10.3399/bjgp11X549135>



# The Phoenix Programme

## Who are we?

The Phoenix Programme supports all GPs in Nottingham and Nottinghamshire. We act as a coordination point for support, mentorship, funding for training, CPD and career advice. We are a small, close team, who have good links to training providers and funders, the local Integrated Care Partnerships, Primary Care Partnerships and the Training Hub (NATH). This means that we will work with both new to practice GPs, and other colleagues in their practices, to make sure that they can access the funding and support they need to thrive.

## National Guidance

The support we offer has been based on national policy, including the 2020/21 New to Practice Guidance, the provision for Fellowships in the GP Forward View and the latest GP Contracts, and we update our support offer in light of new policy and evidence on a regular basis. We have also conducted our own evaluation of our support, and continue to draw on the findings from other evaluations in the area.

## Organisations we work with

We also work closely with the Local Medical Committee, the Primary Care Workforce Group of the ICS and NATH (Nottingham Alliance Training Hub).

The Phoenix Programme offers support to GPs across their career path, including targeted support for new to practice GPs in the first year post CCT, access to fellowships and funded training for new GPs in the first five years after their CCT, and career advice, preceptorship and mentorship for new GPs.

We also offer:

- support around return to work for GPs who have taken a career break
- access to mentorship, career advice and advice on research or project work for all GPs
- support for GP Partners who would like to take on different roles as they approach retirement, for example leaving their role as a partner but continuing to work in teaching, research, or supporting hard to recruit practices.

If you are considering recruiting a newly qualified GP, we are able to advise you on the support available to them, and mentorship and advice for you as you support their progression to independent practice.

# Support for New to Practice GPs: Mentorship, Social Support and Preceptorship



Even before the onset of COVID-19, newly qualified GPs told us that *“a lot of us have anxieties, however good you are,”* and that being a fully independent GP was *“scary”*. National studies show anxieties around the fear of making mistakes, work life balance, and feelings of inadequacy around the business management skills needed to be a GP Partner.

The Phoenix Programme offers a range of support, including specific preceptorship sessions run by GPs who are relatively newly qualified themselves. These include advice on work life balance, the appraisal system, and developing resilience.

We encourage social networking amongst newly qualified GPs, to allow informal problem solving and professional friendships to emerge; GPs have told us that *“everyone is on the same platform and it’s informal, and you never feel judged.”* This is important; several GPs who moved to the area told us that this could make it difficult to know who you could turn to for informal support. This will be particularly important in the aftermath of the COVID-19 epidemic, which has slashed opportunities for face to face networking, conferences or training in person. The NHS People Plan [2] emphasises the need for social support and a compassionate approach; we can help you facilitate this for all GPs, but particularly for those new to an area.

We acknowledge that the pressures on General Practice can make it hard to release time for GPs to attend training, preceptorship or networking events. There is funding available for CPD for doctors who have been qualified for less than a year under the New to Practice Guidance [3], which may cover backfill; we can work with you to establish whether you are eligible for this. We also hold many events in the evening, and virtually, to minimise the amount of time away from patients that they consume.

[2] We are the NHS: People Plan – action for all of us (2020)  
[https://www.england.nhs.uk/wp-content/uploads/2020/07/We\\_Are\\_The\\_NHS\\_Action\\_For\\_us\\_all-1.pdf](https://www.england.nhs.uk/wp-content/uploads/2020/07/We_Are_The_NHS_Action_For_us_all-1.pdf)

[3] NHS England (2020) Guidance for General Practice Fellowships  
<https://www.england.nhs.uk/wp-content/uploads/2020/08/general-practice-fellowships-2020-21-guidance.pdf>



# Portfolio careers

## How we help Portfolio GPs

Many new GPs are interested in establishing a portfolio career.

We can help them identify their interests, and we coordinate multiple funds that are able to support access to Fellowships, our own Fellowship Lite programme, postgraduate qualifications or roles in service improvement across the ICS. We have helped new GPs apply successfully to be digital fellows, working on the roll out of patient accessible digital notes, GP Fellows who have introduced new roles including GP Assistants and Social Prescribers, who have developed training on mental health across primary care and additional training for practice managers, and who have become clinical fellows in Diabetes care.

Not all the GPs that we support are interested in a portfolio career, and many will plan to work full time in clinical practice. However, we are keen to support those that do want to broaden their skills and experience.



# Portfolio careers continued...



## Why encourage portfolio careers?

It may seem counterintuitive to encourage GPs to reduce their clinical hours in a time when we are also told that there is a shortage of GPs and that patients have to wait to be seen. Why encourage fellowships, project work and further training now?

Firstly, it can encourage recruitment and retention. When we asked new GPs about their involvement with the Phoenix Programme, several stated that the opportunity for training or development was “very attractive”, and helped address some of the perceived disparity between opportunity for development in primary care and secondary care.

Secondly, the changes in pace between clinical work and academic, project or service development work protects against burnout. This is reflected in several interviewees who viewed full time clinical work as “*just not do-able*” [N2], and stated that their attention is better if they are doing non-clinical days: “*if my balance is better my attention to patients is better*”. Burnout is linked to medical errors, as well as absence for mental health leave and doctors leaving the profession. Some GPs told us that the change in pace between clinical work and other work had allowed them to stay in role, had led to them changing their mind about emigrating, and that supported time to gain diplomas had meant that they had decided not to work as a locum.

Thirdly, working on portfolio work allows people the space and time to identify their own strengths and talents, which some people told us had been different from what they had thought in training; some have discovered talents for teaching, project management and motivating others that they had not expected. They feel they have found a “*niche*” where they can translate their personal strengths into “*positive change*.” One mentioned that before settling on a Fellowship role they attended several events where they had outlined opportunities and a range of potential fellowships and projects; although they had enjoyed their training it had “*felt like a bit of a production line*,” with little time to focus on “*the rest of my life*.” Another fellow [said that the skills they had gained were “*very different from what I thought I wanted*” but that this had been “*brilliant*.”

Finally, the practice itself benefits from the enhanced knowledge, interests and skills that the GPs can bring. We have found that GPs who work broadly across the whole system are more embedded in Nottinghamshire and less likely to plan to leave the area in the future. This also supports a wider understanding of the system.



# Support for practices employing New to Practice GPs

## A range of support offered:

We offer a range of support to GPs later in their career, including those supporting newly qualified GPs. This includes mentorship, preceptorship, and help identifying funding streams for further development.

If you have a newly qualified GP or a trainee GP who has specific interests, we can use our growing expertise in identifying and applying for funds to support the application, which will improve their chance of success and reduce the time spent on it in the practice. If we cannot help directly, we can advise on other sources or routes for funding.

We can also advise you on mentorship opportunities for more experienced GPs, and can help identify advice or training if you identify that the senior GPs in your practice need more confidence in mentoring or leadership. We know that COVID-19 has had a severe impact on your opportunities for informal support from your peers, and we may be able to put you in touch with GPs who have similar experiences to you and could offer virtual support.

We also offer specific, tailored advice to GPs who are interested in gaining more teaching skills, who are returning to work after a break and would like to be updated on how supervision and support for new GPs has changed since they were last in practice, or who would like advice on new opportunities or better work life balance for themselves.



# Contact details

The Phoenix Programme can be contacted Monday to Friday, 9am to 5pm via the following:

- Call us on 0115 979 6918
- Email us via [info@phoenixprogramme.co.uk](mailto:info@phoenixprogramme.co.uk)
- Visit [www.phoenixprogramme.co.uk](http://www.phoenixprogramme.co.uk) and use our online contact form.

