Case study name: Post-Certificate of Completion of Training (CCT) Fellowships

Start and end dates of work covered by case study: April 2014 - present

Overview summary
WMAHSN, working with West Midlands NHS trusts and universities and Health Education West Midlands, identified that the complex challenges facing the NHS of an ageing population, presenting with multiple comorbidities, requires a “cross fertilisation” of knowledge, practice and ideas. The WMAHSN Board approved support for the Post-Certificate of Completion of Training (CCT) Fellowships programme to catalyse this at a regional level.

The programme has so far enabled seven local GPs to undertake additional skills training to enhance the services provided within the emergency department, medical assessment unit and ambulance settings, successfully supporting the Fellows to develop a broad range of knowledge and skills related to urgent care. The programme has been enthusiastically received and is enhancing the services provided within the emergency department, medical assessment unit and ambulance settings, successfully supporting the Fellows to develop a broad range of knowledge and skills related to urgent care.

The Fellowship has proved popular with the GPs who have participated in the scheme and with the teams in which the Fellows have been placed. The Fellows have become more adept at making best use of community-based alternative care pathways, so supporting patients with acute care needs to remain outside hospital and supporting improved joined-up care across GP, community and A&E settings. In addition, the pilot also revealed numerous factors that may be important to the future success of the scheme, whether in the West Midlands or nationally.

The Fellowship has proven feasibility and provides a model for up-skilling GPs to work in an enhanced way across primary care, urgent care and emergency care settings. GP Fellows can and will support admission avoidance and make greater use of community-based alternative care pathways. The programme has and continues to challenge traditional barriers, which have previously resulted in patients receiving fragmented, inappropriate and costly care.

The success of the programme provides evidence that can inform future NHS strategy and policy, and the AHSN is now working to promote the wider uptake of this approach.
Challenge identified and actions taken

The complex challenges facing the NHS of an ageing population, presenting with multiple co-morbidities, requires a “cross fertilisation” of knowledge, practice and ideas. The Post-Certificate of Completion of Training (CCT) Fellowships programme aims to catalyse this at local level. The programme was developed by a partnership supported and funded by WMAHSN, Health Education West Midlands (HEWM), and local NHS trusts.

The planned outcomes are:

- To enable the retention of generalist skills and the development of specific and enhanced skills to fit new settings of urgent care
- To enhance the function of the GP within the Emergency Department (ED), Medical Admissions Unit (MAU) and ambulance service teams
- To develop ways in which the GP can apply enhanced urgent and acute skills to support the identification, introduction and maintenance of community-based alternative care pathways.
- To raise GP interest in emergency medicine career paths
- To support and follow the national policy drive for improving joined-up care, spanning GPs, social care and A&E departments – overseen by a named GP
- To understand better the needs of patients, why they are attending ED and how the GPs role could be adapted to improve ED avoidance
- To develop innovative ideas/share best practice of meeting the emergency medicine agenda in primary care
- By the end of 2015, to have up to nine fellowships in place, working between general practice and A&E departments, with evaluation delivered by partner universities.

Impacts/outcomes

- With support from WMAHSN’s Theme Director, Professor Peter Winstanley, HEWM successfully delivered a two-phase test of concept pilot, recruiting seven West Midlands GP Fellows, between January 2014 and November 2015
- In March 2015, Warwick Medical School delivered an interim evaluation report, covering Phase 1 of the pilot. The evaluation confirmed fitness-for-purpose and scope for scale- and spread of the proposed Fellowship model
- The programme team prepared a project brief to extend the scope of the Fellowship, with four variations of the Urgent and Acute theme: Primary Care Paediatrics, Mental Health (including Veteran’s Health), Frail Elderly Community Care and Medical Education and Leadership. The brief was delivered to Health Education West Midlands for consultation on 21 August 2015
- The extended programme proposal has been endorsed by HEE Medical Director Prof Wendy Reid and Health Education England’s Chair, Sir Keith Pearson
- To demonstrate suitability for national scale and spread, the project team are collaborating with a team representing the three London LETBs and Health Education Kent, Sussex and Surrey (KSS), following a request for collaboration in providing a Pan-London and KSS Urgent and Acute Care GP Fellowship. The West Midlands model was accepted by the four Postgraduate Deans and development led by the Health Education London and Southeast Director of Education and Quality. The four LETBs have worked
collaboratively with HEWM, to launch their Primary Care Fellowship in Urgent and Acute Care - as a pan-London and KSS test of concept - from September 2015

- Overall, the Fellowship has proved popular with the GPs who have participated in the scheme, whether as Fellows or through providing host practices, and with the teams in which the Fellows have been placed
- Through a variety of mechanisms the scheme is enhancing the services provided within the ED, MAU and ambulance settings, and has successfully supported the Fellows to develop a broad range of knowledge and skills related to urgent care
- The Fellows have become more adept at making best use of community-based alternative care pathways, so supporting patients with acute care needs to remain outside hospital. This was widely seen to be supporting improved joined-up care across GP, community and ED settings. In addition, the pilot also revealed numerous factors that may be important to the future success of the scheme, whether in the West Midlands or nationally
- For the Fellows themselves the scheme was felt to have been an exciting and challenging opportunity, unlike anything that they had encountered before. Their experience of the Fellowship was very different to what they had expected, and in the main surpassed expectations
- Participating in the scheme had extended their scope of practice and enhanced their self-confidence, academic and leadership skills in ways that they had not anticipated. Not only did they feel confident to undertake a future role that spanned primary care and emergency care, but they felt better able to lead and educate their primary care and secondary care colleagues in how best to utilise community-based services and help patients avoid unnecessary admissions to secondary care
- The success of the pilot provides evidence that can inform future NHS strategy and policy. The Fellowship has proven feasibility and provides a model for up-skill GPs to work in an enhanced way across primary care, urgent care and emergency care settings, supporting admission avoidance and making greater use of community-based alternative care pathways. It successfully challenged the traditional barriers that result in patients receiving fragmented, inappropriate and often unnecessarily costly care
- The Fellowship supports the development of a new sub-specialty of GPs with the leadership, clinical and academic skills to drive forward implementation of the national policy drive for improving joined-up care across the NHS, and supports the future innovation and sharing of best practice.

Supporting quotes
Jeremy Hunt, Health Secretary: “Building on the success of a Health Education England pilot in the West Midlands, we will incentivise a number of newly qualified GPs with an extra year of training and support to develop specific skills needed in areas such as paediatrics, mental health and emergency medicine.”

Sir Keith Pearson, Chair of Health Education England: “There is a greater need than ever before for joined up working within our national health service. Our GP workforce must be capable of providing comprehensive care and access to community care pathways for an increasingly aged population of patients, who present with an ever-wider range of complex health issues. The Health Education West Midlands Post-CCT GP Fellowship programme addresses this need, by providing enhanced skills training for the GP of the future. This innovative scheme demonstrates that training can continue to occur across sectors, enabling patients to be seen by the right professional, in a timely manner.”
Which national clinical or policy priorities does this example address?

From the NHS Five Year Forward View:

- The NHS will take decisive steps to break down the barriers in how care is provided between family doctors and hospitals
- Services need to be integrated around the patient
- Across the NHS, urgent and emergency care services will be redesigned to integrate between A&E departments, GP out-of-hours services, urgent care centres, NHS 111, and ambulance services
- New care model – Primary and Acute Care Systems (PACS)
- The most appropriate employment arrangements to enable our current staff to work across organisational and sector boundaries. HEE will work with employers, employees and commissioners to identify the education and training needs of our current workforce, equipping them with the skills and flexibilities to deliver the new models of care, including the development of transitional roles.

Plans for the future

- The programme aims to have up to nine fellowships in place, working between general practice and A&E departments
- Potential for scale and spread will be analysed through a combined evaluation of the Pan London/KSS and West Midlands programmes. Evaluation will be led by the Warwick Medical School evaluation team, and will be disseminated by WMAHSN to its network and members.

Contact for further information

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