

GP Salaried Portfolio Innovation (SPIN) Scheme



**RECRUITMENT
BOOKLET**

May 2021

This booklet contains information on the GP Salaried Portfolio Innovation (SPIN) Scheme application process for Haringey, and provides job descriptions of the roles available to newly-qualified GPs as part of this scheme.

Please note that these roles are primarily for GPs who have just completed or are about to complete their GP training and would therefore be able to take up posts from summer 2021. Priority will also be given to 0-5 GPs who are working as locums or otherwise not in permanent employment in Haringey. If you do not fit into either of these categories but are still in the first five years post CCT Training, we will consider your application. It is hoped there will be another cohort of roles advertised later in the year.

Please read this booklet carefully.

Summary

Haringey GP Federation is advertising two further salaried innovative portfolio roles (SPIN) for GPs. These include sessions with a local practice and a portfolio role within a service run by the Federation. Priority for these roles will be given to NQGs looking to take up a position in a Haringey practice. However, applications will also be accepted from GPs within first five years of practice and NQGs who are already in a substantive role in Haringey.

Each role comprises:

- A permanent offer of a salaried GP contract in a GP practice for between 3-7 sessions a week
- A portfolio role for two sessions per week, for one year
- Monthly education sessions across North Central London, with experienced GP educator (optional if not within first two years of practice)
- Mentoring from an experienced local GP (optional)

Employment

- Employment for the 3-7 sessions in primary care will be with the individual GP Practice
- Employment for the two portfolio sessions will be with Haringey GP Federation
- The sessional rate for the primary care sessions is £9,250
- The sessional rate for the portfolio sessions is £9,000-9,500, dependent on experience.

Summary of Cohort Two Portfolio Roles:

- One role is available with the Haringey Homeless Health Inclusion Team (HHIT) run by Haringey GP Federation.
- One role is available with the Multi-Agency Care Coordination Team (MACC) for frailty, run in partnership by a range of agencies, but with Haringey GP Federation taking a joint lead role with Whittington Health NHS Trust.

About the Federation

Federated4Health is the Federation of Haringey GP practices. Our vision for Haringey is 'a healthier and happier population through strong and innovative General Practice.'

We provide a range of services in Haringey, including those which are best delivered by Primary Care at scale; integrated services, working with partners in our local borough partnership; and support services including back office support, workforce and training and some shared staffing clinical teams. We also currently manage two local GP practices and lead the Haringey Training Hub.

We are a relatively young organisation which has grown quickly both in scope and reputation. We are committed to providing high quality care and pride ourselves on being innovative and able to mobilise projects quickly. We are a friendly team that works together and supports each other to provide excellent services in Haringey.

Instructions to applicants

Priority for these roles will be given to NQGs looking to take up a position in a Haringey practice. However, applications will also be accepted from GPs within first five years of practice and NQGs who are already in a substantive role in Haringey.

SPIN role selection process

- Refer to the job descriptions for each role.
- Note the interview dates (where stated).
- Complete the Application and Personal Statement Form, with details of the roles you wish to apply for.
- Send the Application and Personal Statement Form, together with a copy of your CV, to Sarah Barron at sarah.barron2@nhs.net by **5pm on Thursday 10th June 2021**. If you would like an informal discussion, please contact Sarah on 07833 464634.
- Your application and CV will be reviewed by clinicians and managers from Federated4Health, the Haringey GP Federation.
- Shortlisted candidates will be contacted in mid June and invited to attend an interview.
- Candidates who have not been shortlisted will be contacted by end of June.
- Following interviews, the successful candidates for each role will be notified.
- At that stage, they will be sent a list of Haringey GP practices seeking a salaried GP, and asked to select those they wish to meet.
- The selected GP practices will invite the candidate to a meeting.
- The candidate will be notified of successful practice meetings, asked to make a choice and will commence the role as soon as possible thereafter.

Portfolio roles available

Job reference: SPIN101

GP SPIN FELLOW Haringey Homeless Health Inclusion Federated4Health

Post:	GP SPIN FELLOW Haringey Homeless Health Inclusion
Contract Term:	1 year fixed term
Responsible to:	Senior Transformation Manager, Federated4Health
Clinically supervised by:	GP clinical and service lead, Federated4Health
Accountable to:	Chief Executive Officer, Federated4Health
Place of work:	Federated4Health Offices (currently Hornsey Central Health Centre) plus, mobile locations/outreach
Hours of work:	Two Programmed Activities (sessions) / 1 day per week 9am-5pm – hours may vary depending on service activity requirements
Sessional rate:	£9000-£9,500 per session per annum, dependent on experience
Interview Date:	17 th June PM (please state in your application if this may be an issue)
Role Start Date:	Summer 2021

THE POST:

MAIN PURPOSE OF JOB

1. To provide a clinical GP session for the Outreach Bridging Clinic for homeless patients in Haringey
2. To provide a clinical GP session for the Outreach Service (Street and Accommodation outreach service)
3. To support the service to build and develop

ACCOUNTABILITY AND SUPERVISION

The post holder will be accountable to the CEO of F4H, managed by the Senior Transformation Manager and supervised by the GP clinical and service lead.

RESPONSIBILITIES

- To deliver a high standard of patient care using advanced autonomous clinical skills with in-depth theoretical knowledge and evidence based practice.
- To manage a clinical caseload and deal with presenting patients' needs in outreach, in-reach clinic and primary care settings.
- To provide clinical leadership where appropriate within HHHIT and support other members of the team to develop and maintain clinical skills appropriate to your role and expertise.
- Recognise the need for alternative working patterns and flexibility.

KNOWLEDGE, SKILLS AND EXPERIENCE REQUIRED

See personal specification.

PRIMARY DUTIES & AREAS OF RESPONSIBILITY

Clinical

- Provide first point of contact for patients presenting with undifferentiated, undiagnosed problems, utilising history taking, physical examination, problem-solving and clinical decision-making skills to establish a working diagnosis and management plan working in partnership with rough sleeping patients and patients within general practice.
- Undertake outreach, in-reach, clinic and surgery based consultations for immediately necessary care or routine problems including management of long term conditions. In addition, undertake telephone calls and video consultations.
- Instigate necessary invasive and non-invasive diagnostic tests or investigations and interpret findings/reports within the scope of a paramedic's Practice. Discuss the result and implications of laboratory investigations with patients.
- Utilise clinical guidelines and promote evidence-based practice.
- Offer a holistic service to patients and their families, developing where appropriate an on-going plan of care/support with an emphasis on prevention and self-care.
- Refer patients directly to other services or agencies using appropriate referral pathways.
- Ensure safe handover of care within and outside the HHHIT Service and GP Practice as appropriate.
- Work directly with members of the HHHIT and support integrated patient centred care through appropriate working with wider primary care / social care networks / multiple agencies such as Mental Health, Substance Misuse and Local Authority teams.
- Identify community health needs and participate in the development of patient/family-centred strategies to address them.
- Contribute to the HHHIT Service and GP practice quality targets to consistently achieve high standards of safe, evidence-based, cost-effective patient care and service delivery.

Training and development

- Participate in continuing professional development opportunities to keep up-to-date with evidence-based knowledge and competence in all aspects of the role to meet clinical governance guidelines for Continuing Professional Development (CPD) and a Personal Development Plan (PDP) utilising a reflective approach to Practice.
- Undertake a variety of research and analysis tasks associated with the improvement of clinical care, medical diagnosis and treatment where appropriate using the following means.
 - Audit of clinical practice
 - Significant event review / root cause analysis
 - Review of relevant literature
 - Research unusual symptoms and treatment options through consultation with general practitioners, physicians and other specialists.

- Participate proactively in a learning culture within the HHHIT and GP Practice and assist in clinical instruction, mentoring and supervision of medical, nursing or physician associate students and other learners that may periodically be attached to the HHHIT and GP Practice
- Contribute to regular multi-disciplinary and HHHIT and GP Practice educational meetings.
- Participate in Multi-Disciplinary Protocol and Patient Group Directions (PGDs) development as appropriate.
- Work closely with other clinical staff and administrative managers in the setting up and/or improving of the HHHIT and GP Practice systems for monitoring/measuring performance against Clinical Governance and Quality Indicator targets.

Administration

- Fully document all aspects of patient care and complete all required paperwork for legal and administrative purposes in accordance with relevant standards.
- Work in accordance with internal administrative systems relating to but not limited to the management of clinical data.
- Send and receive written information on behalf of the HHHIT and GP Practice relating to the physical and social welfare of patients.
- Work closely with other clinical staff and administrative managers in the setting up and/or improving of the HHHIT Service and GP Practice systems for monitoring/measuring performance against Clinical Governance and Quality Indicator targets and work to deliver the NHS contract pertinent to the Rough Sleeper Service and GP Practice including the terms of the Quality and Outcomes Framework and locally enhanced services.
- Ensure that all HHHIT Service and GP Practice policies are fully implemented.

Person Specification

Criteria for selection	Essential requirements	Desirable requirements
Qualifications	<ul style="list-style-type: none"> • Registered GP • GMC and RCGP certification AND: • DBS clearance • Current and valid certification 	<ul style="list-style-type: none"> • Evidence of Continuing Professional Development activities • Basic Life Support • Experience working with patients experiencing homelessness
Clinical Experience	<ul style="list-style-type: none"> • Advanced clinical practice skills • Clinical examination skills • Management of patients with common acute medical conditions • Management of patients with long-term conditions • Knowledge of the NHS • Understanding of the current issues and challenges facing primary care and the rough sleeping population 	<ul style="list-style-type: none"> • Recent experience of working in an outreach service • Management of patients with complex needs • Experience of preventative medicine • Experience with chronic disease management • Experience of working to achieve standard within the Quality and Outcome Framework (QOF) • Experience of trauma informed care • Experience of mental health, substance misuse management

		<ul style="list-style-type: none"> • Experience of wound care • Experience of working with patients across a range of settings • Experience in managing conditions which affect rough sleeping and homeless populations
Professional and multi-disciplinary working	<ul style="list-style-type: none"> • Ability to work well with colleagues and within a team 	
Management and administrative experience	<ul style="list-style-type: none"> • Ability to organise and prioritise workload effectively • Ability to exercise sound judgements when faced with conflicting pressures • Confident in use of email • Excellent record keeping skills 	<ul style="list-style-type: none"> • Proficient in use of EMIS
Personal attributes	<ul style="list-style-type: none"> • Ability to work flexibly to meet the needs of the Rough Sleeper Service and GP Practice • Interest in Inclusion Health and working with marginalised populations • Highly motivated • Energy and enthusiasm • The ability to work under pressure and organise workload effectively • An enquiring and critical approach to work • Caring attitude to patients • Ability to communicate effectively with colleagues, patients, relatives and agencies • Commitment to Continuing Clinical Education and Professional Development 	<ul style="list-style-type: none"> • Bi/Multilingual abilities desirable
Other requirements	<ul style="list-style-type: none"> • Declared history of medical-legal cases including any pending 	
Personal requirements		<ul style="list-style-type: none"> • UK Driving licence

SAMPLE TIMETABLE (Subject to change/review)

A job plan will be agreed by F4H, candidate and employer to enable experience and supervision in post.

A personal work plan will then be developed based on objectives and can include some induction period working on inpatient unit.

	Example of activities
AM	0900-1300 Clinic based session for homeless patients in Haringey OR Outreach shift (can be joint shift with care navigator)
PM	1400-1800 Clinic based session for homeless patients in Haringey OR Outreach shift (can be joint shift with care navigator) OR Service Build Activity

THIS JOB DESCRIPTION WILL BE SUBJECT TO REVIEW IN THE LIGHT OF CHANGING CIRCUMSTANCES AND MAY INCLUDE OTHER DUTIES AND RESPONSIBILITIES DETERMINED AFTER CONSULTATION BETWEEN THE MEDICAL DIRECTOR AND POST-HOLDER

Job reference: SPIN102

GP SPIN FELLOW MACC Team (Frailty)

Federated4Health

Post:	GP SPIN FELLOW Multi Agency Care & Coordination Team (Frailty)
Contract Term:	1 year fixed term
Responsible to:	Senior Transformation Manager, Federated4Health
Clinically supervised by:	GP clinical and service lead, Federated4Health
Accountable to:	Chief Executive Officer, Federated4Health
Place of work:	Lordship Lane Health Centre, 239 Lordship Lane, London.
Hours of work:	2 Programmed Activities (sessions) / 1 day per week 9am-5pm – hours may vary depending on service activity requirements
Sessional rate:	£9,000-9,500 per session, dependent on experience
Interview Date:	17 th June PM (please state in your application if this may be an issue)
Role Start Date:	Summer 2021

Background: The MACC Team

Mission Statement: *to manage health, wellbeing and prevent crises through innovative partnership working.*

The Multi Agency Care & Coordination (MACC) Team is a newly established, preventative care service for Haringey adults living with frailty or multiple long-term health and social care needs.

The MACC Team is a core element of Haringey's 'Anticipatory Care' plan in conjunction with PCNs, primary care and other partners. Following an anticipatory care model, we provide structured proactive care and MDT support to patients with rising risk before they require acute interventions.

Key aims:

1. To benefit patients with complex needs, and their carers, by enabling them to stay healthier for longer, maintain or improve functional ability and benefit from positive experiences of proactive, personalised and self-supported care;
2. To reduce need for reactive health care for specific groups of patients and supporting actions to address wider determinants of health;
3. To deliver better interconnectedness between all parts of the health system and the voluntary and social care sectors.

The Team

We are an integrated team of over 20 professionals from multiple disciplines and multiple agencies (including Care Navigators, Community Matrons, Occupational Therapists, Physiotherapists, Pharmacists, a Social Worker, Mental Health practitioners, Operational and a GP Lead).

We provide holistic assessments and interventions to support a patient's medical, functional, mental health and social care needs within the wider team. These interventions are tailored according to both the type and level of need.

Proactive Case finding: As well as accepting referrals into the service we will be working in partnership with Haringey GP practices to proactively identify patients living with frailty who may benefit from our support.

Through such multiagency and integrated team working we hope to offer more joined up and patient-centred care to keep people well, work towards their goals and reduce avoidable hospital attendances or crises.

JOB SUMMARY

The role offers two sessions (one day) per week within the MACC Team. This is an exciting opportunity for a GP to become an integral member of our team, providing GP input and clinical support.

- To gain experience in assessing and supporting patients living with frailty and multi-morbidity through an MDT approach.
- To provide experience in multiagency, integrated team working that can be shared across care settings with collaborative working.
- To support the ongoing development of the team and service.

The role is suited to a clinician interested in integrated and innovative team working across disciplines who has an interest in a patient centred approach to supporting people living with frailty and or multi-morbidity.

It is an opportunity for professional/portfolio development and to help implement service change within a supportive environment.

We would welcome this GP to join our team to share expertise and learning, and to develop knowledge and skills that will be transferable to work in primary care and improve links between different sectors, agencies and professional groups. In this way, influencing efforts across health and social care to shape integrated working.

The post is based at our team office in Lordship Lane Medical Centre, although may involve work across Haringey as required (including the GP Federation at Hornsey Central Neighbourhood Health Centre).

KEY WORKING RELATIONSHIPS

Collaborative working with a range of professionals in our MACC Team. Liaison and fostering relationships with particularly Haringey GPs but also secondary care, community services, adult social care, mental health services and voluntary sector workers where required. Close working relationship with the team GP and Operational Leads.

ACCOUNTABILITY AND SUPERVISION

The post holder will be accountable to the CEO of F4H, managed by the Senior Transformation Manager and supervised by the GP clinical and service lead.

KNOWLEDGE, SKILLS AND EXPERIENCE REQUIRED

See Person Specification below

RESPONSIBILITIES

Key Responsibilities and Duties

- Contributes to ensuring that clients and their carers experience a safe, high-quality patient centred service. Adopting a strength-based, holistic approach to patient care, beyond the medical. Taking into consideration all aspects of their lives and wellbeing (including functional, psychological and social care needs), with a focus on goal setting, care planning and self-supported care.
- To provide clinical support and advice to both clinical and non-clinical members of the team. To be an available point of contact to discuss often medically complex patients and provide a GP perspective in terms of clinical assessment and ongoing management. Supports Operational leads with clinical supervision of other team members.
- Where appropriate, to complete joint or individual assessments (home based or virtual) with patients who have clinical needs or medical complexity requiring GP clinical skills or expertise.
- Active participation in a weekly MACC Team MDT meeting where client cases are discussed for input from the wider team and shared learning.
- Interprets often complex information, including findings from diagnostic tests and examinations, using this to make clinical decisions about care.
- Liaises effectively within the team and with professionals across different sectors and agencies to provide planned and co-ordinated care. To include acute escalation of care as required.
- Works within the Clinical Triage team to help screen referrals received into the service using different desktop platforms (e.g. EMIS, RIO, BEH RIO, MOSAIC, MEDWAY). To provide sound clinical decision making and reasoning when triaging such referrals.
- Engages in proactive working partnerships with Haringey GP practices to help the MACC Team to identify and support patients living frailty. To help develop this arm of the service.
- Utilises clinical guidelines and promotes safe evidence-based practice.
- Reports clinical incidents and near misses and sets action plans to ensure learning is shared, and to mitigate against repeat incidents and near misses.
- Identifies and reports risk, ensuring steps are taken to mitigate any identified risks in daily work, and making rapid autonomous decisions.

Service Development

- Contributes to ongoing team and service development, including clinical protocol and pathways, including documentation.

- Considers and uses new and innovative ways of working, efficiencies and evidence based best practice, to support change management.
- Acts as a role model for integrated working and collaboration between professions, services, and organisations to optimise client care. To particularly support the GP Lead in promoting frailty pathways and the MACC service across the Haringey GP network.

Professional Development

- Participates proactively in a shared learning culture, to actively participate in team reviews and service development projects through team meetings, educational events, quality improvement projects and audits.
- Engages and actively participates in reflection. Maintains own personal knowledge and skills through continuous professional development, clinical supervision, peer review, educational updates and revalidation requirements.

Administration

- Fully documents all aspects of patient care and complete all required paperwork for legal and administrative purposes in accordance with relevant standards.
- Maintains accurate clinical records and activity data is maintained (with due regard to confidentiality and data protection) to enable the review of service effectiveness, outcomes measures, KPI.
- Sends and receives written information on behalf of the MACC team relating to the medical, psychological, and social welfare of patients.
- Ensures safe handover of care, allocating work directly to other team members using agreed pathways /processes. Where the service user’s need cannot be met within the wider MACC Team, refer to appropriate services or agencies using referral pathways

Person Specification

Requirement	Essential	Desirable
Qualifications	Registered GP GMC and RCGP certification AND: DBS clearance Current and valid certification Membership of a recognised defence union.	Evidence of Continuing Professional Development activities Basic Life Support Adult Safeguarding training

<p>Clinical Skills/ Experience</p>	<p>Advanced clinical practice skills.</p> <p>Confidence in clinical decision making and risk assessments.</p> <p>Management of patients with multiple long-term health conditions.</p> <p>Management of older patients including those living with frailty.</p> <p>Experience with chronic disease management including medications management.</p> <p>Keen to develop knowledge of frailty, anticipatory care models and integrated MDT working.</p>	<p>Knowledge of NHS Long Term Plan, Ageing Well Strategy/Current Frailty guidance/ Anticipatory Care Service Models / Primary Care Networks.</p> <p>Management of patients with complex needs.</p> <p>Experience completing holistic assessments across multiple domains (medical/environmental/psychosocial/mental health/functional).</p> <p>Experience working within a specific Frailty or Care of the Elderly setting.</p> <p>Experience working in a community setting.</p> <p>Experience working with patients with mental health issues.</p>
<p>Professional and multi-disciplinary working</p>	<p>Is committed to effective integrated team working in a multi-professional setting.</p>	<p>Experience in working within a multi-professional and/or cross agency team.</p>
<p>Communication skills</p>	<p>Strong oral and written communication skills in English.</p> <p>Ability to build good relationships and work collaboratively with all team members and other professionals/agencies.</p> <p>Ability to relate to patients from a wide range of backgrounds and to empathise with their needs and concerns.</p>	<p>Experience of working in a multi-ethnic, multi-faith environment.</p>

	<p>Ability to communicate effectively with patients, the public and colleagues and treat others with compassion, dignity and respect, taking into account any diversity issues.</p>	
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THIS JOB DESCRIPTION WILL BE SUBJECT TO REVIEW IN THE LIGHT OF CHANGING CIRCUMSTANCES AND MAY INCLUDE OTHER DUTIES AND RESPONSIBILITIES DETERMINED AFTER CONSULTATION BETWEEN THE MEDICAL DIRECTOR AND POST-HOLDER

Elements of the Job Description applicable to both roles

Professional

- Maintain your professional registration working within the latest Code of Professional Conduct (CIPD).
- Undertake statutory and mandatory training as required by the HHHIT/MACC Service and GP Practice.
- Demonstrate clinical leadership.
- Pro-actively promote the role of the GP within the HHHIT /MACC Service and GP Practice and externally to key stakeholders and agencies.
- Respect patient confidentiality at all times and not divulge patient information unless sanctioned by the requirements of the role.

Health and Safety

- Comply at all times with the Federation and GP Practice Health and Safety policies by following agreed safe working procedures and reporting incidents using the organisations Incident Reporting System (IRS).
- Comply with the Data Protection Act (1984) and the Access to Health Records Act (1990).
- Using personal security systems within the workplace according to practice guidelines.
- Identifying the risks involved in work activities and undertaking such activities in a way that manages those risks.
- Making effective use of training to update knowledge and skills.
- Using appropriate infection control procedures, maintaining work areas in a tidy and safe way and free from hazards.
- Reporting potential risks identified.

Equality and Diversity

- Co-operate with all policies and procedures designed to support equality of employment. Co-workers, patients and visitors must be treated equally irrespective of gender, ethnic origin, age, disability, sexual orientation, religion etc.
- To promote a culture which respects and values diversity, and support patients, visitors and staff in exercising their rights.
- To recognise and report behaviour which undermines equality and diversity in accordance with organisation policies and current legislation.

Communication and working relationships

- Establish and maintain effective communication pathways with all Rough Sleeper Service and GP Practice staff and visiting clinical team members such as mental health nurses, outreach workers, hostel staff, district nurses, modern matrons, health visitors etc.
- Recognise people's needs for alternative methods of communication and respond accordingly.

Job Description

- The job descriptions are intended to provide an outline of the key tasks and responsibilities. There may be other duties required of the post-holder commensurate with the position. This description will be open to regular review and may be amended to take into account developments within the Services.

Contribution to the Implementation of Services:

- Apply practice policies, standards and guidance.
- Discuss with other members of the team how the policies, standards and guidelines will affect own work.
- Participate in audit where appropriate.

Our commitment to you

- We will provide a supportive learning environment, especially structured in the first preceptorship year.
- We will help you set out and revise specific educational goals.
- We will ensure appropriate clinical supervision.
- You will receive regular appraisal.