

East Kent Clinical Commissioning Groups

Clinical Leadership in Commissioning (CLIC) Programme

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**Version Control**

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**Clinical Leadership in Commissioning (CLIC Rotational Scheme)**

The GP Clinical Leadership in Commissioning (CLIC) rotational scheme is an innovative integrated GP training post (ITP) that has been used for a number of years, and features across many areas in Health Education England Kent Surrey Sussex (HEE KSS). ITPs have been integrated within ST 1 and 2 primary care rotations, (Rickenbach et al, 2006). Educationally, they are an extension of the educational placement for trainees that are a regular part of the GP placement (such as attending an outpatient clinic, community clinic, or public health department). Previously, they have consisted of a combination of GP Trainer employed and hosted posts, or part placement (and employment) in a GP Training Practice and part placement in a hospital or community clinic post.

The CLIC rotation is a 4 month module (GP training scheme placement) that comprises of 5 clinical sessions within a GP practice and 2 days within the commissioning activity. Most trainees will work on a Wednesday and Thursday within the commissioning component of the rotation, with the other clinical sessions in GP Practice. Wednesdays are mandatory and are structured around planned sessions with experts in areas of commissioning or workshops which relate to key aspects of leadership development. CLIC students are also required to attend an action learning set every Wednesday, which is facilitated by one of the two programme directors, who oversee the management of the rotation. Thursday’s are usually the student’s project day where they work within the CCG on an agreed project that is fed back into the organisation on completion of the programme. The project and placement learning are also presented to peers and supervisors at the end of the program as part of the trainees’ assessment.

Normally there are between 2 and 6 CLIC trainees allocated to east Kent Clinical Commissioning Groups (CCG) at a time. Trainees are supported by the CCG to observe and take part in an identified project; ideally in an area that is of interest, and to learn about leadership by shadowing leaders and attending high level meetings.

**Aim of the CLIC Rotational Scheme**

The overall aim of the GP Clinical Leadership in Commissioning (CLIC) rotational scheme is for GP trainees to develop a deeper understanding of the processes and systems which underpin clinical commissioning and the complexity of networks which are required to meet the needs of the population.

***Learning Outcomes:***

Trainees will be able:

* To understand the relationship between the process of change at the organisational and individual level; the impact on human behaviour and the skills and attributes of leadership required to implement change and apply these within clinical practice.
* To develop a project within a commissioning context and demonstrate an understanding of the different stages of the commissioning cycle through discussion with clinical commissioning leads
* To reflect upon personal attitudes, values and beliefs in light of new knowledge and demonstrate a development of understanding of self through reflective entries within the RCGP e-portfolio, engagement in the action learning sets, case based discussion and the formal presentation at the end of the rotation.
* To examine the differences between organisational cultures and demonstrate flexibility and adaptability in promoting partnership working.
* To develop an understanding of the strategic nature of commissioning in terms of population health needs and service development.
* To explore the impact of social determinants on population health and the need for an integrated approach to improving health outcomes
* To understand the role of public health information data and its role in commissioning governance

 **Roles and Responsibilities:**

***The CLIC GP Trainee***

* The CLIC trainee is responsible for liaising with the clinical GP placement to agree his/her clinical sessions (maximum of five sessions) around the Wednesday and Thursday ITP placement. Trainees can work a different project day but this needs to be agreed with the GP programme director (PD), their Educational supervisor (ES) in clinical practice and CCG supervisor so that the trainee can be accommodated within their allocated project area.
* The CLIC trainee is responsible for negotiating with the CCG supervisor, an area of work which engages in Leadership / Quality Improvement (trainee is advised to read CCGs Annual Reports and Governing Body Meetings to align project to CCG priorities: documents can be found on CCG websites).
* The CLIC trainee is responsible for arranging to attend meetings such as: CCG Governing body and Primary Care Co-commissioning meetings (details can be found on CCG websites).
* The CLIC trainee is responsible for his/her own IT during the rotation and needs to sign the CCG Confidentiality agreement and be aware of data protection and CCG governance processes.
* The CLIC trainee will agree with their CCG Supervisor and CCG Project Lead their project working day.
* The CLIC trainee will work with a project lead within the CCG to develop their project and understand how their selected area of work relates to the commissioning cycle.
* The CLIC trainee will make their Outlook diary accessible to their CCG Supervisor, CCG Project Lead and CCG Admin Support (Admin Support via ekccgs.quality@nhs.net) for their one day a week rotation.
* The CLIC trainee is responsible for organising their own annual leave and informing the Programme Administrator, (PA/Local Faculty Group administrator), PD, CCG Supervisor and CCG Project Lead about annual leave requests.
* The CLIC trainee must also ensure that they contact their CCG Supervisor, CCG Project Lead and CCG Admin Support by email ASAP if they are off sick on a CCG project day and PA and PD for other dates.
* The CLIC trainee must also ensure that they contact the PA and PD if they wish to request study leave or are unable to attend an educational session.
* The CLIC trainee will be expected to demonstrate their learning throughout this rotation through reflective entries within their e-portfolio and link to the current expectation of 2 entries per week. The entries will need to consider the links between commissioning and practice activity and development of self.
* The CLIC trainee will need to give consideration to the norms and mores of different organisations. Communication is an essential component of this rotation so the trainee needs to ensure that the PD, CCG Supervisor, CCG Project Lead and CCG Admin Support have their correct contact details and check their emails regularly for messages and reply in a timely manner.
* The CLIC trainee will also need to arrive on time for meetings. It is their responsibility to contact the appropriate person if you are running late or unable to get to a meeting.
* Trainee presentations: Trainees are expected to demonstrate evidence of learning, teaching and team working as part of RCGP curriculum requirements and personal professional development. In this placement the trainees are invited to present to their CCG supervisors, CCG project lead, Educational Supervisors and peers at the end of the 4 month placement. Presentation guidance is provided by the PDs.
* The CLIC trainee is expected to provide a summary of their project to both the CCG Supervisor and Project Lead within the CCG, in addition to a one slide summary for the CCG’s Clinical Assurance Strategy Committee.
* CLIC trainees will participate in the programme feedback and evaluation

***HEE KSS Programme Directors***

* The Programme Directors (PDs) are responsible for the development of the educational component of the rotation and curriculum mapping to in-place learning. They will work in collaboration with CCG colleagues and ES or Clinical Supervisors (CS) working within GP clinical placements to deliver the programme.
* The PDs will ensure that the CLIC trainee project is appropriate and that they have access to a CCG Supervisor within the east Kent CCGs who will support them through the experiential component of the rotation.
* The PDs along with the HEE KSS locality Associate Dean will deliver the half day HEE KSS Supervision training session to CCG staff that have oversight of trainees.
* The PDs will also liaise with ES and CS within clinical placement to strengthen the relationship between the commissioning and the placement context.
* The PD will facilitate the weekly action learning sets, where trainees can reflect upon their knowledge and understanding of their practice experience and consider ‘self’ in relation to their learning.
* The PD will facilitate a series of interactive leadership workshops which aim to help understand the process of change management and the skills required to influence change.
* The PD will provide a programme timetable for the 16 weeks. However, these are subject to change and it is the responsibility of the PD to ensure that trainees receive change to venues and activities in a timely fashion.
* The PD will be responsible for the summative assessment at the end of the rotation; this will comprise a case based discussion and end of placement presentation of learning.
* The PD is responsible for sharing the programme evaluation with participants and stakeholders

***The Clinical Commissioning Group***

* The Executive Sponsor for the CLIC rotational scheme will be the Chief Nurse for the four east Kent CCGs
* The Deputy Clinical Chair responsible for the CLIC trainees will support the CCG Supervisor and CCG Project Lead in relation to any clinical and / or performance issues.
	+ The CCG Supervisor will refer to HEE KSS PD in regards to any concerns.
* The Deputy Clinical Chair responsible for the CLIC trainees, where possible will meet with the CLIC trainee at the beginning and at the end of the four month rotation.
* The Quality Safety and Improvement Team (QSIT), Primary Care Workforce Development Leads (PCWDL) will oversee the CLIC trainees and act as the overall CCG supervisor.
* The CCG Supervisor will support the trainee in selecting an appropriate area of work which links to leadership / quality improvement and aligns to CCG Annual report.
* The CCG Supervisor and CCG Project Lead will agree with the CLIC trainee their project working day.
* The CCG Supervisor will refer the CLIC trainee to a project lead and other colleagues who will be able to support them with their agreed project and agree CCG Project Lead.
* The CCG Project Lead will support the CLIC trainee in the development of their agreed project.
* The CCG Supervisor and CCG Project Lead will provide regular guidance and support throughout the four month placement: meeting with trainees to discuss and help them to reflect upon their progress with their project and refer them to other colleagues who will be able to support the progress and enable the trainee to develop solutions to problems as they arise.
* The CCG Project Lead will liaise with the CCG Clinical Lead for the project area for them to offer relatable guidance and support to the CLIC trainees: encouraging and facilitating the CLIC trainee to make the most of this learning opportunity.
* The CCG Supervisors and/or the CCG Project Lead will have completed or will be completing the HEE KSS Supervision training delivered by PDs and/or HEE KSS Associate Dean.
* The CCG Admin Support will oversee the CLIC trainee Outlook diaries and note any sickness or absences.
* The CCG Supervisor and/or CCG Project Lead whenever possible will attend the trainee presentation at the end of the rotation.
* The CCG Supervisor and/or CCG Project Lead to submit CLIC project summary to CCG’s Clinical Assurance Strategy Committee on completion of rotational programme.

 ***Educational Supervisor (ES)***

* The ES will support the CLIC trainee allocated to them by linking their learning from the Clinical Commissioning rotation with what goes on in practice in terms of Quality Outcomes Framework, Quality Premium and commissioning incentives.
* ES’s are to encourage CLIC trainees to engage in practice meetings and discussions so that they can deepen their understanding of the implications of commissioning decisions in relation to patient referrals, prescribing and the broader health and social care agenda.
* ES’s are to encourage CLIC trainees to work alongside practice managers and clinical leads to observe different approaches to leadership and how change is implemented within the practice.

**Appendix 1 Example Timetable for CLIC trainee use for portfolio**

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| **Name of CLIC Trainee** |
| **Name of CCG Supervisor** | **Contact details of Supervisor** |
| **Name of CCG Project Lead** | **Contact details of Project Lead** |
|  | **Date** | **AM** | **PM** |
| **Week 1** |  | **Meet with CCG Supervisor to discuss project ideas** | **Research potential project** |
| **Week 2** |  | **Meet project lead** | **Project work at CCG Base** |
| **Week 3** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 4** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 5** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 6** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 7** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 8** |  | **Meet with CCG Supervisor / Project Lead** | **Project work at CCG Base** |
| **Week 9** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 10** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 11** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 12** |  | **Meet with CCG Supervisor / Project Lead** | **Project work at CCG Base** |
| **Week 13** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 14** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 15** |  | **Attend Meetings / Supervision** | **Project work at CCG Base** |
| **Week 16** |  | **Meet with CCG Supervisor and Project Lead****Where possible meet with Duty Clinical Chair responsible for Clinical Fellows and CLIC trainees** |

**Appendix 2**

HEE KSS PD to inform CCG Supervisors and ekccgs.quality@nhs.net about CLIC Trainees and start dates

**Standard Operation Procedure**

Advise CLIC Trainees to review CCGs Annual Reports & Governing Body minutes to consider an area of improvement that will support our challenges when agreeing their project.

Advise CLIC Trainee to look at meeting opportunities via websites: e.g. Governing Body, Primary Care Co-Commissioning

**HR Processes / Roles & Responsibilities**

1. CCG Agree Project day
2. CLIC Trainee to provide access to Outlook diary to:

CCG Supervisor

CCG Project Lead

CCG Admin Support

1. CLIC Trainee to inform CCG staff if off sick / absent via ekccgs.quality@nhs.net
2. Notify CCG staff if running late for meetings
3. CLIC Trainee responsible for their own IT equipment

Trainee to submit outcome and summary slide of project to CCG Supervisor and CCG Project Lead

**Colour Codes**

Blue = HEE KSS Programme Director (PD)

Orange = CCG

Red = CLIC Student

Trainee and HEE KSS PD to invite CCG staff to presentation

CCG Supervisor to contact HEE KSS PD of any concerns

CCG Supervisor to identify CCG Project lead and inform CLIC Trainee

CCG Project Lead will:

Meet with the CLIC Trainee on week 1 or 2 of the rotation to define project with CLIC Trainee

Refer to other colleagues who can support project

Provide regular guidance

Notify CCG Supervisor and Deputy Clinical Chair Responsible for CLIC Trainees of any concerns

Attend Presentation at end of programme

CCG staff to attend presentation at end of rotation

Deputy Clinical Chair to provide support in relation to Clinical / performance issues

CCG Supervisor / Project Lead to submit summary slide to Clinical Assurance Strategy Committee

CCG Supervisor & CLIC Trainee’s first meeting:

 Discuss and agree project

Discuss Induction / HR Processes / Confidentiality

Agree supervision support

CCG Supervisor to contact CLIC Trainees via email and arrange 1st meeting to discuss project