

SRMC Objective for the Future

It is recognised that some of the following objectives set for SRMC in May 2017 were ambitious and perhaps difficult to evidence.

- Increase in first round recruitment of rural GP vacancies
- Rural GP job satisfaction will increase
- Co-ordinated and sustainable resource to support GP recruitment and retention
- Structured and specific remote and rural development planning will be 'business as usual' for GPs
- No recruitment contact will be lost
- Single strategic approach to remote and rural GP recruitment in Scotland
- Reduction in locum cover required for remote and rural posts
- Measurable improvement in relocation support

SRMC agreed to meet the GP R&R Fund objectives in the following manner:

- By understanding and addressing retention issues for working age GPs
- By promoting Scottish GP as a positive career choice
- By encouraging alumni to stay in / return to Scotland
- By developing sustainable models of remote and rural primary care
- By supporting education infrastructure in primary care
- By providing high quality support and information for prospective GPs in Scotland
- By making the most of expertise of remote and rural GPs at the end of their careers
- By supporting implementation of NHS Scotland PIN policies

It is recognised that progress has been made against many of these objectives. A brief paragraph outlining how the objectives have been met would be helpful.

It is also recognised that SRMC has had significant difficulties getting Project Managers recruited into post. It is encouraging to see the calibre of Project Managers recruited and the way in which they complement the skills of those already in post.

There is now a maturity of understanding around the needs of Rural GP Recruitment and Retention along with capacity in the team to deliver further outcomes.

The Scottish Government would like to see SRMC:

- Produce clear "SMART" objectives against the work streams agreed at the May SRMC workshops. It is hoped that each project will be at a point for informed discussion and decision making at the next SRMC Project Board.
- Support the further development of "Discover the Joy" into Phase 2, involving the other rural Health Boards.
- Develop the Reflect and Rejuvenate project.
- Continue to undertake the "business as usual" body of work and develop a simple reporting mechanism to ensure that the work is recognised.

- Develop a list of future projects for the SRMC Board to consider at its next meeting.
- Increase buy-in from participating Health Boards.
- Develop an exit strategy options appraisal, which should include:
 - An options appraisal for expanding the remit from GP to MDT recruitment and retention.
 - An outline options appraisal for the expansion of SRMC learning around recruitment and retention into a wider strategy for both rural and urban primary care.
 - Establishing of a Primary Care recruitment bureau

A lot of work has been undertaken in understanding the issues underlying Rural GP Recruitment and Retention over the last 2 years. It is clear that a lot of this work is transferrable to the MDT and urban general practice. This work needs to be capitalised on to ensure GP recruitment and retention. A swifter, less risk-adverse approach is looked for.

The landscape has changed over the last 2 years with, amongst other things, the implementation of the new GP contract. The concerns raised by rural GPs regarding the contract have helped focus attention on rural primary care and a lot has been learnt through engagement with rural GPs as well as around both rural and urban issues through the sustainability work stream.

This is a critical time with an evolving rural primary care strategy developing. It is hoped that through regular working with Fiona and Charlie SRMC can help inform the development of this strategy and position itself to be most effective in the future.

Charlie Siderfin 3/6/19