



## The Non-EU Rural GP initiative: An ICGP HSE collaboration

### 1. Introduction

General practice is fundamental to delivering high-quality healthcare across Ireland, delivering over 500,000 patient consultations/week. The ICGP has demonstrated outstanding leadership: transitioning GP training into ICGP and throughout the COVID-19 pandemic. We now face another massive challenge. Ireland is experiencing a severe GP workforce crisis, fueled by an expanding ageing population, multimorbidity and COVID-19 related workload.

This Non-EU Rural GP initiative is a strategic HSE ICGP collaboration. Rural general practice is currently in deep crisis. Many GP practices are experiencing highly precarious GP workforce challenges, compromising both patient safety and practitioner wellbeing. Our rural GP workforce could easily enter a self-perpetuating downward spiral, as the workforce crisis accelerates retirement and deters newly establishing rural GPs. The consequences of a 'domino' cascade following closure of a rural practice is immediate, substantial and widespread across the healthcare ecosystem. We simply cannot "*train our way out*" of this GP workforce crisis.

The Non-EU Rural GP Programme is a strategically important component of the multi-faceted ICGP response to our severe GP workforce crisis. We need substantially more rural GPs, and we need them now

The ICGP Statement of Strategy 2023-2026<sup>1</sup> recognises this and aims to provide solutions to the workforce crisis in general practice.

Our GP workforce is ageing, with 14% aged 65y+,<sup>2</sup> with retirement plans accelerated by COVID-19. Increasingly GPs seek an enhanced work-life balance with a blended career, incorporating clinical work, teaching, and research. Timely access to high quality GP care is fundamental to patient safety. A sufficient GP workforce with manageable workload can deliver safe, high quality patient care, avoiding unnecessary ED attendance and hospital admissions.

We currently have approximately 4257<sup>1</sup> GPs in Ireland. The HSE, ICGP, DoH and IMC recognise the need to expand the GP workforce by 40%<sup>3</sup> to meet the healthcare needs of our population. This requires another >1400 GPs: bringing our GP workforce to 5,000. NHS Scotland and the Scottish government recently recognised that working 8 sessions/week comprises a full time GP role. This increases the number of GPs required by a further 20%. We need to plan for a GP workforce of 6,000 by the end of 2028. We graduated 174 GPs in October 2022. We plan to expand to 350 trainees in 2026, provided sufficient hospital posts are secured.<sup>4</sup>

To bridge the GP workforce deficit by 2030 solely by GP training, requires every newly qualified GP to work full-time, no GPs to emigrate, retire or die. Clearly this is not realistic. This GP workforce crisis has onerous workload implications for our ICGP members, with profound implications for patient care, patient safety and the wider healthcare ecosystem. We cannot 'train our way' out of the GP workforce deficit. We need substantially more GPs, and we need them now.

### Case study 1

*Single handed GP, in mid 40's with a young family, in Blarney town has submitted GMS resignation and is now working the 3 months' notice. This GP has written to all patients advising of the inevitable practice closure on 31<sup>st</sup> December 2022, advising them to seek another GP. This GP advised Dr Quinlan that the compelling factor in the decision to resign was continued inability to secure a locum for holiday cover with young family. The implications for patients, local GP practices and A&E departments are real and immediate.*

## 2. Details of the programme

The Non-EU Rural GP Programme is an important foundation of the multifaceted immediate ICGP response to the severe GP workforce crisis in rural Ireland. This initiative is supported by ICGP, IMO, the HSE and all the GP indemnity organisations. The programme has secured HSE funding in excess of €300,000 to establish the programme.

The role of the Non-EU Rural GP Programme is to:

- Expand and support our rural GP workforce
- identify suitable non-EU GPs, in accordance with the programme criteria, for rural GP practices
- facilitate supported and supervised clinical practice
- assist the non-EU GP to undertake the ICGP (MICGP) exam, leading to Specialist Registration with the Irish Medical Council. This aligns with the MCI strategic aim to transition doctors from the general to specialist register.
- encourage the retention of these non-EU GP in rural Irish general practice

This programme is open to suitably experienced applicants working within Ireland and in Non-EU Countries. If applicants are successful, it will enable non-EU GPs to work in routine, daytime rural GP practice for 2 years, with some GP OOH work. The ICGP and the 'host' GP practice will provide substantial ongoing education supports, generous protected study leave and clinical supervision. This will ensure that participants practice safely and learn effectively. We are supporting experienced non-EU doctors with appropriate GP experience. To enrol in this 2-year programme, these non-EU GPs must already have at least three years general practice experience. The non-EU GP must also have completed hospital rotations in paediatrics and general medicine, with other desirable clinical rotations, such as Emergency medicine, O&G etc. We require that they have passed the applicable English test required by the Medical Council. The non-EU GP will have a named GP supervisor in their rural host GP practice.

Some non-EU GPs are currently working in Irish General Practice, without educational supports, study leave or supervision, raising patient safety issues: these GPs are eligible for this programme. However, these doctors do not increase our GP workforce headcount.

Patient safety is our top priority. The patient safety risks arising from our GP workforce crisis are stark. The programme will enable successful participants to undertake the MICGP exam a benchmark of professional competence. The programme will have ongoing evaluation of both process and outcomes.

### **3. Process**

Candidate GPs will apply via the [ICGP online portal](#). Their applications are reviewed to ensure they meet the eligibility criteria and invited to interview. Programme participants will commit to a two-year programme during which they will have access to an extensive education programme including:

- A 2-3 day induction programme for non-EU GPs
- Access to ICGP eLearning resources
- Access to ICGP education events
- Access to ICGP blended learning programmes
- Paid protected study leave prior to MICGP exams
- Access for candidates to sit the MICGP exams
- To date 18 applicants have been accepted onto this rural GP programme.
- This programme will undertake a full and complete evaluation from the outset and the reports of which will be shared with key stakeholders, including HSE. The evaluation is to ensure maintenance of education and clinical standards.

Each candidate GP will have a named clinical supervisor, based in the GP practice.

GP practices will apply for inclusion in the programme via an ICGP online portal.

Participating GP practices commit to:

- employing the non-EU GP
- Attending an online programme for clinical supervisors
- offering support to the candidate regarding social issues, eg, integration into the community
- facilitating the non-EU GP to join the local ICGP CME group
- arranging for the candidate to gain appropriate supported and supervised experience in the local GP out-of-hours service.
- allowing the Non-EU GP, a paid half day each working week (ie, one session) for self-directed learning, for 40 weeks of the year. This includes another two weeks of paid study leave prior to MICGP exams.

## Case study 2: North-West Cork

*The four rural towns Millstreet, Newmarket, Kanturk and Boherbue comprise Cork north-west.*

*There were 19 GPs across these four towns in 2018. Retirements and deaths have depleted this GP workforce, with just 12 GPs remaining: three of whom plan to retire within 3y. The onerous workload and substantial GP OOH commitment are an insurmountable barrier to attracting young GPs. The population in Cork North-West is increasing, driven by 'affordable' property prices. However, these new arrivals, mostly young couples with children, cannot register with a GP practice.*

The group comprises:

- **Dr Tony Cox:** Previous roles: ICGP President, ICGP Medical Director, Chair of Exams, Chair PGTC, GP trainer, Clinical Lead international projects
- **Professor Liam Glynn:** Professor, University of Limerick School of Medicine, Board member ICGP
- **Dr Velma Harkins:** GP trainer, Chair QSiP until 2022, ICGP Board member until 2022, inaugural National GP Clinical Lead Diabetes, Previous Chair ICGP research, PGTC member for >20y, current ministerial appointee to National Screening committee. HSE GP Unit doctor, Chair of MIDDOC co-op x 20y, Ministerial GP appointee to establish 'Breast-check',
- **Dr Triona Marnell:** ICGP examiner. Member of MICGP Exam sub-committee. Convenor of short essay question (SEQ). Oversaw transition from SEQ to Applied Knowledge Test. Secretary of steering committee of MICGP Alternative route in developing full alternative route to MICGP. Co-convenor, question writer and editor of CKT paper. Medical Council assessor for Category E applications to the MCI specialist register
- **Dr Declan Matthews:** Trainer, Past Chair of Accreditors committee, Member of PGTC;
- **Dr Molly Owens:** Clinical Director for international programmes, ICGP Exams sub-committee, Co-convenor of CKT exam, QA examiner for CCT. CME Tutor, ICGP Council member
- **Dr Paul Mc Gann:** External member: Chief Medical Officer for Quality Improvement, US Department of Health & Human Services (retired Sept 2023)

The overall programme sits within the Centre of Education & Professional Competence in the College.

### 5. Summary & Conclusion:

The ICGP has provided outstanding leadership in expanding and transitioning GP training into ICGP and throughout the COVID-19 pandemic. It is timely to focus on the severe rural GP workforce crisis.

This Non-EU Rural GP initiative is a strategic HSE ICGP collaboration. Rural general practice is currently in deep crisis, with many GP practices facing highly precarious workforce challenges. This compromises both patient safety and practitioner wellbeing. Our rural GP workforce could enter a self-perpetuating downward spiral, with the workforce crisis accelerating retirement and deterring newly establishing rural GPs. The consequences of a

'domino' cascade following closure of a rural practice is immediate, substantial and widespread across the healthcare ecosystem. We simply cannot "train our way out" of this GP workforce crisis.

The Non-EU Rural GP Programme is a strategically important component of the multi-faceted ICGP response to our severe GP workforce crisis. We need substantially more rural GPs, and we need them now. This initiative is supported by HSE, ICGP and all medical indemnity organisations. The consequences of this GP workforce crisis on patient safety, practitioner wellbeing and the wider healthcare ecosystem are profound. The HSE is legally mandated to provide patients with GP care. The HSE must identify and implement solutions to support patient access to GP care. This programme fulfils that strategic HSE mandate.

We are under no illusions about the challenges ahead. We will do everything possible to ensure our rural GP colleagues are supported. Thank you for the trust and confidence you place in us. We will do our utmost to meet your expectations.

## REFERENCES

1. Irish College of General Practitioners, *Navigating the Future for General Practice: Statement of Strategy 2023–2026*, Irish College of General Practitioners, 2022. [Online] Last Accessed: 22/11/2022. <https://www.icgp.ie/go/library/catalogue/item/445F1654-F9C6-4D81-B459391D337A2870>
2. Irish College of General Practitioners (ICGP). Membership and PCS enrollee database as of Sept 30, 2022. Unpublished data.
3. ICGP Working Group on Workforce Planning, *Shaping the Future: A discussion paper on the workforce & workload crisis in General Practice in Ireland*, Irish College of General Practitioners, 2022. [Online] Last Accessed: 22/11/2022. <https://www.icgp.ie/go/library/catalogue/item/25610FDF-72D6-49AE-B57126453F6B2E6A>
4. Irish College of General Practitioners (ICGP) January 2022. *Submission to the Oireachtas Joint Committee on Health*. Irish College of General Practitioners. 2022. [Online] Last Accessed: 22/11/2022. <https://www.icgp.ie/speck/properties/asset/asset.cfm?type=LibraryAsset&id=DEE6B490%2D4182%2D4538%2D815F1F68432B9F22&property=asset&revision=tip&disposition=inline&app=icgp&filename=ICGP%5FSubmission%5Fto%5Fthe%5FOireachtas%5FJoint%5FCommittee%5Fon%5FHealth%5F25%5FJanuary%5F2022%2Epdf>