

**The Scotland Deanery**

The Scotland GP Returner Programme

Updated March 2025**The Scotland GP Returner Programme**

**Context**

The Scotland GP Returner Programme is for GPs who have worked in NHS General Practice but have been out of clinical General Practice in the UK for more than two years and wish to **return to work** in NHS General Practice in Scotland. This might include GPs who are returning from a career break or those returning from working outside the UK. This programme is funded by Scottish Government and operated by NHS Education for Scotland, providing applicants with a salary to support them whilst on the programme.

Details and frequently asked questions in relation to the Scotland GP Returner Programme can be found at:

<https://www.scotlanddeanery.nhs.scot/your-development/gp-induction-and-returner-programmes/>

This programme provides a route to return safely to General Practice in a supported way. The programme will be tailored around you using an individual learning needs assessment. You will be allocated a practice-based supervisor who will provide feedback to support your integration as an independent general medical practitioner in the NHS in Scotland.

An interview with a GP Advisor from NHS Education Scotland (NES) will establish eligibility and suitability for the programme. A suitable placement in an approved GP training practice for an attachment of **up to** six months (Whole Time Equivalent) will be sought. Placements are not guaranteed.

Formative assessments, during the placement, will include a test of knowledge (RCGP Self-Test) and workplace-based assessments including consulting skills. At the end of the programme, the supervisor will make a summative recommendation in relation to suitability for independent practice and unrestricted inclusion on the Scottish Performers’ List.

**Aims**

The aims of the Returner Programme are to:

1. Provide a supportive and clinically relevant educational environment in which GPs can refresh and update their knowledge and clinical skills.

1. Provide formative assessments for the GP during the practice attachment.
2. Provide a clinical reference through an Educational Supervisors Report (ESR) supported by evidence to those managing the Performer List.
3. Enable GPs who are committed to live and work in Scotland, to return to the GP work force.

**Eligibility Criteria**

To be eligible for the programme, the following criteria must be met:

1. Certification of completion of GP Training or equivalent in the UK by a competent authority.
2. On the GMC GP Register, without GMC [conditions or undertakings](http://www.gmc-uk.org/DC6535_Information_for_doctors_who_have_undertakings_or_conditions_that_affect_their_practice_58388105.pdf) (except those relating solely to health matters) and hold a current license to practice as a GP.
3. Previously worked in NHS GP providing a full range of primary care services, but the applicant has not been working in clinical general practice in the UK for the preceding two years or more.
4. Eligible to be included on the Performers’ List on completion of the programme as confirmed by the Health Board.
5. Eligibility for Medical Defence Organisation membership on completion of the programme.
6. Committed to live and work in NHS General Practice in Scotland.
7. Has not already undertaken, commenced or been unsuccessful in similar programmes elsewhere in the UK.
8. The programme can be undertaken at less than full time with the minimum being 50%.
9. Those returning form a period of ill health must be deemed fit to work by an Occupational Health Physician and that joining the programme is sustainable and will not put their health at risk. The programme is solely to offer educational support and is not designed as a supported return to work from ill health.

**Process**

How to Apply for the Scotland GP Returner Programme

* If you wish to practice as a GP in Scotland, have worked previously in NHS GP but have not done any clinical general practice in the UK NHS for two years or longer, you should **register your interest in the programme through accessing the website** <http://www.scotlanddeanery.nhs.scot/your-development/gp-induction-and-returner-programmes/>
* Arrangements will be made for you to meet with an advisor for the GP Returner Programme in the region where you wish to work. This will include a review of your previous training and experience and advice on next steps. You are required to provide an up-to-date CV to inform this meeting.
* If you wish to proceed, you first need to apply to be considered for inclusion on the Performers List by the Scottish Health Board area in which you will be primarily working. A list of Health Board Performers’ List administrators can be accessed via this link [Scotland GP Returner Programme](https://www.scotlanddeanery.nhs.scot/your-development/gp-induction-and-returner-programmes/scotland-gp-returner-programme/)
* The administrator will send you an application pack which you should complete and return including all the documents requested. Your application to join the Performers’ List will be considered by the Health Board Medical Director who will decide whether you can have entry to the Performers’ List and will act as your initial gateway board.
* If the decision is to include you unconditionally on the Performers’ List, then you may start work as an independent general practitioner. You should apply for GP posts which are normally advertised in the BMJ or on the <https://gpjobs.scot/work-in-scotland/> website. You will be offered an early appraisal.

**Process for GPs returning to work in Scotland**

NES Responsibility

Qualified GP who wishes to return to NHS GP practice after career break or who wishes to return to work in Scotland & who has previous NHS GP experience

Health Board Responsibility

The doctor accesses the NES website

Advice sought from relevant NES regional office of Scotland Deanery

Recommendation to Health Board Medical Director

a) A standard induction provided by the employing organisation

or

 b) GP Returner Programme

Direct Entry to Performers List without conditions or career advice

Application to join local NHS Board Performers’ List considered by administrator & Medical Director of relevant Health Board

NHS Board Medical Director confirms eligibility for entry onto performers’ list provided returner programme successfully completed. Health Board place GP on Performers List under the “GP Returner” Programme (NES) category

NHS Education employs doctor and arranges placement in approved practice

At end of placement, Deanery conveys outcome and recommendation to NHS Board Medical Director

NHS Board Medical Director either agrees full inclusion onto Performers’ List without conditions or provides career advice in consultation with Deanery educational lead

If included on performers’ list, early appraisal and revalidation as scheduled

If the appropriate route is the Scotland GP Returner Programme, then you will be included on the Performers’ List as a GP Returner for a fixed duration equaling the duration of the programme (up to six months FTE) providing a practice placement can be identified by the NES GP Advisor. NES will become your gateway board for the duration of your programme. There is no guarantee of a placement.

On successful completion of the programme, including a satisfactory Educational Supervisors Report, you will need to contact the territorial Board where you wish to work as a GP. A completion letter will be shared with the Medical Director of said Board who will decide if your performers list status can be changed to unrestricted.

**Teaching and learning**

The GP Returner will be supervised by a named Educational Supervisor (ES) who will have overarching clinical and educational responsibility for the doctor. The ES will:

* arrange a thorough induction to the practice and any recent changes to the NHS in Scotland before the GP Returner embarks on the formal agreed timetable.
* facilitate a learning needs assessment using self-rating scales such as the Lanarkshire checklist.
* learning needs will be discussed during the first mentoring session with the ES, and a plan designed to meet these needs will be agreed.
* tailor the weekly timetable to the learning needs of the Returner.
* Complete the agreed educational contract in the first week for mutual signature (modelled on the timetable suggested below).
* provide regular educational supervision meetings.
* give regular formative feedback to the GP Returner with explicit documented comments about progress.
* advise about PDP & evidence required for appraisal and revalidation.
* register with 14 Fish GPR e-portfolio and use this as tool to record progress and assessments.

**Suggested weekly timetable**

|  |  |  |
| --- | --- | --- |
| Day | Morning | Afternoon |
| Monday | Surgery  | Surgery |
| Tuesday | Surgery | Surgery  |
| Wednesday | Surgery  | A face-to-face session with the Educational Supervisor |
| Thursday | Surgery | Surgery |
| Friday | Surgery | Self-directed learning to address areas identified as weak in PEP, and through educational needs assessment ORPlanned Educational Session as suggested by ES for example:* combined surgery
* recorded surgery for COTs
* appraisal preparation
* reflective log entries
* CDM Clinic with nurse
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* A session is defined as four hours and 10 minutes

* A ‘surgery’ is to include direct patient contact, telephone advice, on-call responsibilities, home visits, and administration as timetabled by the practice.
* Initially each surgery will require close supervision appropriate to the experience, competence and confidence of the GP Returner.
* The consultation rate should be graduated so that by end of the attachment, the doctor has achieved the standard of an independent general practitioner with an average of 10-15 minute appointments to include documentation in line with other clinicians working in the practice.
* Combined surgeries should be offered on a regular basis to allow observation of an experienced practitioner’s management of patients, time management and other strategies.
* We recommend a maximum of eight general surgeries per week, but this should be negotiated in line with the educational needs of each GP Returner.
* The ES will be encouraged to contact the Deanery regional advisor for any advice needed or with any concerns at an early stage.
* There is no requirement for the GP Returner to work in Out of Hours (OOH) but if the GP Returner anticipates applying to do OOH sessions in the future, then this must be discussed at the placement interview with the GP AA. Provided the local OOH service can accommodate the request and once the ES is satisfied that he or she is ready to do this, a pay supplement will be available.

**Assessment**

**Minimum requirements:**

You will be required to do a specified number of formative assessments during your practice attachment.

* **RCGP GP Self-test** which should be completed within the first two weeks of attachment and, if the Returner’s first Self-test score is below peer average score, also at the end of the attachment to demonstrate satisfactory progression.

[RCGP SelfTest](http://elearning.rcgp.org.uk/course/index.php?categoryid=56)

* **Workplace based assessments** should be recorded in the GP Returner e-portfolio. These assessments include those of clinical & communication skills and teamworking. They are based on observed consultations (COTs), case-based discussions (CBDs), 360 degree feedback from patients (Patient Satisfaction Questionnaire) and colleagues (Multisource Feedback MSF via SOAR) and observations of clinical procedures. PSQ and MSF can both be used towards appraisal and revalidation; it is thus in the GP Returner’s interests to complete these during a stable funded post.

Normally this will be **at least** one Case Based Discussion (CBD) assessment per month (pro-rata) and one COT or audio-COT per month (pro-rata). During your placement you will require confirmation that you are competent to carry out the mandatory RCGP Clinical Examination and Procedural Skills.

* Reflective educational diary to be shared with the ES in the GP Returner e-portfolio.
* As part of the programme GP Returner doctors are allocated a £200 allowance towards educational activities available through CPD Connect <https://www.cpdconnect.nhs.scot/>

**NB** Costs incurred for external evaluations such as GP Self-Test are the responsibility of the GP Returner. Returners are eligible for 1-year free RCGP membership.

**Review of progress**

There will be a review of progress at the beginning, midpoint and end of the attachment with a summative conclusion being reached at the end of the programme, using the Educational Supervisors Report within the GP Returner e-portfolio. This will be shared with the GP Returner.

This should demonstrate satisfactory and incremental progress throughout the Programme and continuing ability to reflect and learn from the Returner’s own and colleagues’ practices.

The Associate Advisor will make contact at the midpoint of the attachment to help with any problems

1. The overall time allotted to the Returner Programme will not normally be extended.
2. A failure to progress in achieving the agreed objectives (reaching the standard of an independent General Practitioner) may result in non-inclusion in the Performers’ List.
3. If a failure to progress raises concerns in relation to patient safety or professional probity, the Deanery Responsible Officer may make a referral to the GMC, after having discussed the situation with the Health Board’s Medical Director.
4. If a failure to progress is related to sickness absence, it may be appropriate to defer the completion date of the Programme. The normal quota of annual leave may be taken during the attachment, and this should be pro-rata. Any period of sickness absence greater than that covered by self-certification must be supported by a doctor’s certificate. A cumulative absence due to illness of more than four weeks in six months will trigger a referral to the Occupational Health Service unless seen as unnecessary in the opinion of the ES. Reasons for not making an OH referral will be given.
5. On completion of the programme, the ES will make an evidence-based recommendation based on the ESR, and this will be made available to the Deanery. This is not subject to appeal.
6. The Deanery will provide a report to the Medical Director of the Performers’ List with possible recommendations as follows:
* No concerns
* Needs further development
1. Further developments will be evidenced in the ESR. This report should be considered equivalent to a recent, and detailed clinical reference, and a decision can be made by the Medical Director with responsibility for the Performer List whether to approve unrestricted inclusion on the list.

 NES is responsible through the Deanery for the delivery of the educational assessment and the provision of the Scotland GP Returner Programme. Applicants who wish to complain or appeal against the outcome of any assessment or recommendation would do so through an appeal process with NES. If the GP Returner feels that the GP Returner Programme has not been compliant with the terms of their educational contract, they will be expected to have registered their concerns contemporaneously with documented evidence during the course of their post rather than after receiving their educational supervisor’s assessment. In the absence of valid grounds for appeal, the educational supervisor’s assessment is final.

1. Unrestricted status on the Performers’ List is the decision of the individual Health Board’s Medical Director. A decision to refuse this or to apply conditions on a registration is taken by the Medical Director. Any appeal regarding the outcome of this decision should be made to the Health Board.
2. Revalidation recommendations will be deferred until a GP Returner doctor has successfully completed the programme, been approved as having unrestricted status on the performers list and had an early appraisal by the gateway territorial Board.

Further details around terms & conditions can be found at: <http://www.scotlanddeanery.nhs.scot/your-development/gp-induction-and-returner-programmes/>

 **Appendix 1**

**Pathways to GP Registration**

[Pathways to GP registration in the UK](https://www.rcgp.org.uk/your-career/qualifying-as-a-gp)

**GP Speciality Training**

[General Practice Specialty Training Guidance](https://www.rcgp.org.uk/your-career/qualifying-as-a-gp/cct-guidance/training-guidance)

This is the only pathway to the GP Register which is a qualification.

Doctors awarded a Certificate of Completion of Training (CCT) are added to the GP Register on the date they complete their training.

There are 4 routes to gain CCT:

* **Standard programme** - three years spent in GMC approved GP specialty training.
* **Accreditation of Transferable Capabilities (ATC)** - combining other GMC approved specialty training (usually 6 months) with GP training (usually 30 months).
* **Combined Programme UK (CPUK)** - combining previous non training UK experience (usually 6 months) with GP training (usually 30 months).
* **Combined Programme Overseas (CPO)** - combining previous overseas training and/or experience (usually 6 months) with GP training (usually 30 months).

**Portfolio Pathway**

[The Portfolio Pathway (formerly CEGPR route)](https://www.rcgp.org.uk/your-career/qualifying-as-a-gp/cegpr)

This is only for those with 6 months formal training and/or a qualification in family medicine and was previously called CEGPR.

A portfolio of evidence is submitted to the GMC which must demonstrate knowledge, skills and experience required for independent practice in the UK.

The application can take up to 6 months for the GMC to process.

The RCGP evaluates applications on behalf of the GMC which takes around two months.

**The Recognised Specialist Qualification (RSQ) Pathway**

[The Recognised Specialist Qualification (RSQ) Pathway](https://www.rcgp.org.uk/your-career/qualifying-as-a-gp/rsq-pathway)

This was introduced in May 2024.

Doctors whose qualification from outside Europe is included in the GMC's list can apply for direct entry to the GP Register by submitting a small number of documents.

The RCGP has no role in evaluating these applications.

There are five qualifications on the list from Australia, New Zealand and Canada, based on eligibility for previous Streamlined CEGPR applications.

**The Relevant European Qualification (REQ) Pathway**

[European qualifications in GP or family medicine](https://www.rcgp.org.uk/your-career/qualifying-as-a-gp/european-qualifications)

The GMC continues to automatically recognise qualifications awarded in the European Economic Area (EEA).

Doctors whose qualification is included in the GMC's list can apply for direct entry to the GP Register by submitting a small number of documents.

The RCGP has no role in evaluating these applications.