# Top Tips for Urgent and Unscheduled Care (UUC - Formerly OOH)

## WHY?

By the end of training, GP trainees are responsible for ensuring that they have demonstrated Urgent and Unscheduled Care (UUC) capabilities as defined in the GP curriculum. This applies to ALL trainees after August 2019, regardless of when their training commenced.

GP trainers are responsible for supporting, facilitating and assessing their trainees.

HEE is responsible for the training, supervision and quality assurance of supervisors and organizational providers to ensure they can provide suitable placements.

The curriculum provides guidance about what is expected to be covered

<https://www.rcgp.org.uk/training-exams/training/gp-curriculum-new/professional-topic-guides/urgent-and-unscheduled-care.aspx>

## WHAT ARE THE REQUIRED CAPABILITIES?

COGPED and the RCGP (2019) have defined the following 5 UUC capabilities that all trainees will need to have achieved at CCT.

**1. Knowing yourself and relating to others**

**2. Applying clinical knowledge and skill**

**3. Managing complex and long-term care**

**4. Working well in organisations and systems of care**

**5. Caring for the whole person and the wider community**

## HOW?

GP trainees need to gain experience in GP / primary care settings to develop these capabilities.

These settings include

·GP practices undertaking “Duty Doctor” sessions in-hours

·GP Extended Hours where the service being provided includes provision of urgent appointments and is not limited to only include “routine” follow up of long-term conditions

·Urgent Care Treatment Centres

·Primary Care services delivered within a secondary / community care provider including OOH providers

It is also possible to include experience gained during hospital placements. Experiences undertaken during routine 4-6 months specialty placements likely to contribute to developing generic urgent / unscheduled care capabilities include but are not limited to:

· A and E

· Paediatrics - particularly experience gained in Emergency Assessment Units

· Medicine including Medical Assessment Units

· Psychiatry – experience gained through night / weekend working having resonance

You must be supervised by either an approved Educational or clinical supervisor. Trainees should upload all of their completed “Urgent and Unscheduled Care Session Records” <https://heeoe.hee.nhs.uk/general_practice/gp-trainees/urgent-and-unscheduled-care> to the e-portfolio in addition to entering relevant log entries and completing WPBA that demonstrate their urgent and unscheduled care capabilities.

**Educational Supervisors will use the feedback within the “UUC Session Record”, to guide GP trainees towards demonstration of capability, through the identification of experiential gaps and utilisation of the PDP.**

E-portfolio now allows trainees to link individual learning log entries to urgent and unscheduled care. Trainees should consult the “Example Activities and Evidence for Demonstration of Urgent and Unscheduled Care Capability” document as an aide to collating the relevant evidence.

## SESSIONAL RECOMMENDATIONS?

According to guidance (COGPED and RCGP, 2019) there is no specified activity or time that GP trainees must undertake to achieve capability. There are unique circumstances that trainees will be exposed to in traditional out of hours environments, such as working in isolation with limited access to normal daytime services. The recommendation of the national DUUC working group is that **trainees should aim to undertake 72 hours within traditional OOH** **placements, extended access hubs and urgent care treatment centres as this is the easiest way of demonstrating their urgent and unscheduled care capability.** However, the final assessment is one based on capability and NOT the number of hours worked. Clearly, if trainees have not spent any time in out of hours it may be difficult for them to demonstrate that they have achieved the required capabilities.

Sessions have been defined as the following:

**Observational –** Includes observation of other professional’s consultations in which the trainee has no clinical responsibility, induction programmes to urgent / unscheduled care providers, telephone triage and urgent care orientated consulting skills courses. The time allotted to these sessions should count towards “educational” sessions as described in the COGPED working week for those trainees working in England.

***When – ST1/ST2 GP placements, though could happen in ST3 if a specific learning need is identified.***

**Direct Supervision -** These sessions enable the GP trainee to begin developing their capabilities through the delivery of clinical service to patients in an urgent / unscheduled / out of hours setting and thus KNOW HOW to deliver care. Clinical responsibility lies with the clinical supervisor and not the trainee. These sessions must be undertaken prior to a GP trainee delivering patient care in any out of hours / unscheduled or urgent care organisation and, for a satisfactorily progressing trainee, will make only a limited contribution to the overall experience.

***When – ST1/ST2 GP placements.*** ***In some areas of the region trainees are unable to undertake any sessions above this level and so these sessions will also count towards the required number of hours for ST3 trainees.***

**Near Supervision -** These sessions enable the GP trainee to continue to learn experientially through supported delivery of clinical service to patients in an urgent / unscheduled / out of hours setting. Through such session’s trainees will be enabled to **SHOW HOW / DOES** they deliver such care. These sessions should typically take place in ST3 and the trainee should have timely access to a nominated clinical supervisor who can assess patients directly.

***When – Typically in ST3, but could commence in ST1/ST2 GP placements***

**Remote Supervision -** Trainees may be offered opportunities to experience working with remote supervision whilst still in training as preparation for independent practice, but it is not a requirement prior to CCT. Through these types of sessions, the trainee will demonstrate working at the DOES level of Miller’s pyramid.

***When - Sessions will take place after a trainee has undertaken at least 6 months (FTE) of a GP training placement and the trainee has gained appropriate experience of working under near supervision at ST3.***

It is suggested that GP trainees undertake their “near” and “remote” supervision sessions in traditional OOH settings in ST3 and spread their time evenly throughout the year.

When planning placements, working time directives and / or contractual arrangements such as length of working time and compensatory rest which can adversely impact on the quality of the unscheduled / urgent care and routine learning in the GP placement need to be afforded due attention.

GP trainees must not undertake direct, near or remote clinical sessions in urgent / unscheduled / OOH care providers unless they are in a GP placement, nor whilst on sick leave, maternity leave (unless with prior arrangement with their indemnity provider) nor whilst Out of Programme, as defined by the Gold Guide. Observational and direct supervision sessions may be undertaken during maternity leave as part of their keeping in touch days if appropriate indemnity has been arranged.

GP trainees should not assume responsibility for the supervision of other health care professionals whilst undertaking clinical work in an unscheduled / urgent care / OOH setting.

The delivery of urgent & unscheduled care continues to evolve as does the RCGP GP curriculum - guidance will be reviewed and updated considering this.

## WHAT ELSE?

Check you have appropriate indemnity that covers this work.

If you have concerns about any of your work in this area, please speak to your ES and/or TPD (training programme director) (see links below).

## WEB LINKS

RCGP guidance <https://www.rcgp.org.uk/training-exams/training/gp-curriculum-new/professional-topic-guides/urgent-and-unscheduled-care.aspx>

HEE guide:<https://heeoe.hee.nhs.uk/general_practice/gp-trainees/out-hours-training>

Postgraduate Specialty Training Gold Guide <https://www.copmed.org.uk/gold-guide-7th-edition/the-gold-guide-7th-edition>

NHS Employers: <https://www.nhsemployers.org/your-workforce/pay-and-reward/medical-staff>

HEE Professional Support: <https://heeoe.hee.nhs.uk/psu>

BMA: <https://www.bma.org.uk/>

Whistle blowing <https://www.bma.org.uk/advice/employment/contracts/junior-doctor-contract/whistleblowing>