

Business Proposal for the merger of Orchard Medical Practice and Drs Law & Mountcastle (Churchside Medical Practice)

Author **Orchard Medical Practice (for both practices)**

1. Background / context

Orchard Medical Practice (PMS Contract) is located at Mansfield Community Hospital having moved there in November 2012. The current list size is 12,154. The practice is committed to developing care closer to home. The practice is situated close to the town centre and is on a main bus route from the bus station. Orchard has its own barrier controlled free car park for patients, which also provides dedicated disabled spaces.

On site facilities include an x-ray department and physiotherapy services as well as a pharmacy next door to the practice and these services are welcomed by the patients. The practice is also involved with a number of community based patient pathways. It continues to achieve high QOF scores and patient surveys reflect a high level of satisfaction for services offered. The practice is committed to training and education and will be taking its first GP Registrar in August 2013. The practice is committed to collaborative working with primary care providers, recognising the changing landscape of the NHS and the need to consolidate and enhance the range of primary care services offered to the population served.

Drs Law & Mountcastle (GMS Practice) is currently working at Wood Street, Mansfield, having undergone a partnership split in April 2010 from the remaining GPs still working out of this surgery. The practice has consolidated and expanded its list size since April 2010 by being proactive in accommodating timely access for patients and offering a quality service. The list size has increased significantly in that time from 3200 to 5040. The practice has also achieved high QOF scores and patient surveys reflect a high level of satisfaction for services offered.

The on-going arrangements for Drs Law & Mountcastle in the shared accommodation is unsustainable, as the original partnership had effectively broken down there have been a number of relationship issues between both the practices over recent years affecting GPs and staff particularly. Both practices are unable to expand as their respective list sizes increase and Drs Law and Mountcastle are unable to pursue their wish to become a training practice or develop as they would like additional patient care pathways. Conditions for staff are also extremely cramped, stressful and maintaining confidentiality is difficult as both practices share a reception desk. Because of limited rooms it makes it extremely difficult for Drs Law and Mountcastle to increase their clinical capacity. It is placing a considerable amount of pressure on the two GPs trying to offer their patients a continued high standard of care and at the same time they have limited time for their own individual development and training.

As a benchmark for patient experience, the results of the national GP Patient Survey are extracted below:

| Practice Name | Q28: Overall experience of GP surgery | Q29: Recommend surgery to people new to the area |
|--------------------------|---------------------------------------|--|
| ORCHARD MEDICAL PRACTICE | 93% | 94% |
| DRS LAW & MOUNTCASTLE | 92% | 89% |

Churchside Practice

This practice also suffers from the repercussions of the partnership split in terms of limited accommodation and practice development.

The difficulties experienced by both practices working out of the Churchside practice have been recognised by the Area Team and its predecessor the PCT who had given Drs Law and Mountcastle high priority in terms of finding alternative premises and currently agreement had been reached for them to move into a new build on the site of the old Health Centre in Mansfield.

Geography/ Access

Both practices serve patients in and around the Mansfield town centre and districts. Drs Law and Mountcastle and Orchard Medical Practice do appreciate that should the merger of the two practices be approved a number of patients will choose to re-register with one of the other local practices situated within a few hundred yards of Churchside but consider this to be a short term consequence of the move.

2. The Proposal

Options Considered

In line with previous stated commitments around collaboration Orchard entered into discussions with Drs Law & Mountcastle to consider the benefits of the two practices working more closely together. It was apparent from the outset that it was not an option for Drs Law and Mountcastle to remain working out of the Churchside surgery. However the following alternative options were discussed between the two practices.

Not to merge but to develop closer working relationships

Consideration was given to the two practices working more closely together with Drs Law and Mountcastle working from the site of the old Health Centre. There would obviously be a significant lead-in time for this initiative to work effectively as the new surgery for Drs Law and Mountcastle would need to be built. Although this option would enable both practices to retain their own identities the lack of any formal contractual relationship would make the development of services, and the achievement of a more integrated clinical/ staffing structure, even more responsive to patient needs, more difficult to achieve.

Merger

Consideration was then given to, perhaps, the more unusual option of a complete contractual merger between Drs Law and Mountcastle and Orchard Medical Practice with both practices working out of the same premises. Scoping exercises were undertaken regarding whether there was sufficient capacity at the Mansfield Community Hospital to accommodate the additional clinicians and staff. Subject to minor alterations to the current accommodation, this showed that this was a viable option and a more cost effective solution for the Area Team. This solution would allow the Area Team to save the significant costs of building a new surgery on the site of the old Health Centre releasing the capital costs. It avoids the need to seek NHS England central approval for a capital project and a subsequent process to acquire this capital.

Both practices have very similar clinical aims and objectives with excellent patient care at the top of their agendas. Both practices share a desire to bring more patient care out of secondary and community care closer to patient's homes and support the CCGs primary care strategy. Discussions regarding present staffing structures also suggested that both practices could dovetail together relatively easily. A merger would also enable Drs Law and Mountcastle to become a Training practice and at the same time help them develop their own training and development needs.

After long and hard consideration both practices agreed that a full contractual merger was the way forward and approval was given by the Partners of both practices to submit a business case to the Area Team.

3. Benefits

To patients

- Equality Act (DDA) & CQC compliant refurbished building
- Dedicated patient car park with ample spaces to include disabled parking
- On site pharmacy next door to the practice
- On site access to physiotherapy & x-ray services
- More flexibility around extended opening hours
- Opportunity to extend inner & outer practice boundaries
- Optimisation of the appointment system with more clinicians able to offer an increased number of both on the day and pre-bookable appointments than is currently offered by both practices in isolation.
- Increased number of clinicians to engage with more enhanced services such as anti-coagulation monitoring and family planning services
- Increased levels of reception staff to allow improvement to telephony services – capacity will be monitored and if there is a need for increased phone lines the current telephone system can be upgraded to cope with this.

To practice

- Increased training opportunities for foundation doctors and GP registrars due to flexible workforce
- Enhancement of HCA/nurses services by minor alterations to existing building to increase number of clinical rooms
- Merger acts as a pre-cursor for enhanced federated practice working across CCG
- Improved working conditions for clinicians & staff

- Opportunity to increase patient list size
- Improved WTE GP numbers for registered population
- Provides a greater opportunity to develop, in collaboration with CCG, a range of community care services due to greater critical mass

To other practices (Churchside)

- Increased training opportunities, i.e. training practice development due to increased room availability
- Improved working conditions for staff
- Opportunity to further increase patient list size

To Area Team

- Current issue of two practices working under one roof in acrimonious circumstances resolved
- Issue of capital spend on demolition and re-build of St Johns Street subject to DH approval – not required
- Benefit of capital receipt through sale of St Johns Street Health Centre
- Recurrent notional rent and reimbursable costs at St Johns Street - not required
- Opportunities to pilot innovative ways of working with a large practice committed to bringing care closer to patients
- Reduced number of practices to performance manage
- Training opportunities for Churchside Medical Practice due to increased room availability.
- Both practices are on same medical system (SYSTMONE)- simple integration of patients records achievable with no detriment to patient care through risk of record transfers and allows for smooth transition of clinical pathways/protocols in line with Q&OF

To CCG

- Alignment with forthcoming Primary Care Strategy
- Opportunity to pilot innovative ways of working with a large practice committed to bringing care closer to patients in a quality focused, outcome driven, cost effective manner
- Template for enhanced collaborative working across a number of practices

Longer term benefits of collaborative working

- Further provision of services previously commissioned from secondary and community care with associated cost savings
- Further development of clinicians' skills in different specialities
- Development and integration of a multi-skilled, multi-disciplinary primary/community care team to meet the evolving needs of patients bringing care closer to home.
- The CCG is developing proactive integrated care teams across Mansfield and Ashfield. Practices are encouraged to work more closely with community teams and their peers to risk stratify patients and to support patients in their homes. This will help to prevent exacerbations and admissions to hospital.
- The CCG is encouraging peer review of referrals and multi-disciplinary team discussions. Larger practices will be more able to develop these areas of working and will maintain resilience in service provision

4. Risks

- Patient choice- patients may not wish to move premises – *acknowledged and taken into consideration.*
- Patient's that previously de-registered from Orchard & registered with Dr Law & Dr Mountcastle or the other way around may wish to move - *acknowledged and taken into consideration*
- Local politicians involvement – potential lobbying from patients - *there will be a formal engagement period agreed with the Area Team and a defined timeline described for the proposed merger, open events will be held to encourage the patients voice to be heard and inform the process*
- Logistical risks – IT transfer issues – *close liaison with NHIS to ensure smooth transition of patient records into one system*
 - Failure to cope with increased phone demand – *increased staffing levels allows for expansion of incoming telephone lines – transfer of patients through Patient Registration (SBS) will also be a factor requiring forward planning.*
 - Premises – inadequate room availability – *flexible working to maximise room usage throughout the day and increased number of consulting rooms (2) through minor alterations*

5. Partnership support

Both Orchard Medical Practice and Drs Law and Mountcastle would expect to work closely with the CCG in its endeavours to develop future models of primary care services and in its continued attempts to commission services in a better more cost effective way with major emphasis being placed on urgent care. *There is CCG support for this merger* because it is in line with the strategic direction for primary care. CCG support for other potential primary care developments / mergers will also be considered with reference to the ability to deliver more proactive long-term conditions care, access to services, high quality and sustainable care and peer review of clinical decision making (such as referrals to secondary care).

The practice will be looking to work closely with the Area Team on contractual issues particularly in light of the pending new GP contract and opportunities to inform national debate around its format. *There is AT support for this merger.*

Both Orchard Medical Practice and Drs Law and Mountcastle will also be looking to work closely with the remaining surgery at Churchside to ensure a smooth transition to the new structure.

6. Implementation

Subject to approval by the Area Team Primary Care Panel

- Overall timescale - Subject to a satisfactory consultation period it is planned that the merger will take effect from 1st April. After discussion with the area team they wished to draw our attention to the fact that there is currently a

national stocktake of PMS contracts to inform a central decision in relation to a PMS contract review which could potentially apply to the 2014/15 contract year. Should this PMS review go ahead then the Area Team would have to treat the newly merged practice PMS contract the same as all other PMS contracts in the area team with effect from 1 April 2014.

- Consultation with patients/public-Ideally this would take place as soon as practicable to enable any issues/ concerns identified during the process to be resolved.
- Liaison with Churchside- It is recognised that early dialogue with the other practice at Churchside will help make the transition to the merger as smooth as possible. There will need to be agreement on issues such as furniture and fittings. It might also be possible to agree with the practice an agreement not to accept any patients wishing to re-register with them at the time of the merger because of the benefits that they will receive from the merger.
- Premises- Although the alterations identified at Orchard are not significant building works invariably take longer than first envisaged and the sooner the changes can be made the better

IT- Although both practices are using the same computer system the practices will need to work closely with SYSTMONE to ensure that the two patients lists are integrated as near as possible to the merger date and to ensure that there is no degradation in respect of respective QOF performances.

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| By 1 st September 2013 | Area Team approval for merger |
| 1 st September – 1 st December | Consultation process with Area Team support |
| 1 st December – 1 st February 2014 | Review of consultation process and actions agreed |
| 1 st February – 31 st March 2014 | Implementation of plan |
| 1 st April 2014 | Formal merger of practice |