

**Report to
York Health Overview & Scrutiny Committee**

December 2012

**Application by Priory Medical Group Surgery (York) to merge with
Abbey Medical Group Surgery**

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Care**

NHS North Yorkshire & York

1. Introduction

1.1 This document is to provide a briefing on the engagement process undertaken by the practices (Priory Medical Group Surgery and Abbey Medical Group Surgery) to merge their GP surgeries.

1.2 **Proposal to merge Priory Medical and Abbey Medical Group Surgeries, York**

1.2.1 Priory and Abbey Medical Group Surgeries, both based at York, have requested to merge their practices.

1.2.2 Both surgeries currently operate across 9 sites, namely:

Priory Medical Group

- Cornlands Road, York YO24 3WX
- Belcome Way, York YO30 6ND
- Lavender Grove, Boroughbridge Road, York YO26 5RX
- 45 Heworth Green, York YO31 7SX
- Clementhorpe Health Centre, Cherry Street, York YO23 1AP
- 2 Fulford Park, Fulford, York YO10 4QE

Abbey Medical Group

- Tang Hall Surgery, 190 Tang Hall Lane, York YO10 3RL
- 2 Victoria Way, Huntington, York YO32 9GE
- 28 Millfield Avenue, Hull Road, York YO10 3AB

1.2.3 The PCT is supporting the practices throughout this process by providing project management support.

1.2.4 If agreement is given by the PCT to merge, Abbey Medical Group surgeries will become branch sites to Priory Medical Group and the combined practices will be known as Priory Medical Group.

1.2.5 An engagement exercise has been undertaken to obtain the views of patients and their feedback on the proposals will be taken into consideration by the PCT when making its final decision on whether to allow the surgeries to merge.

1.2.6 As part of the engagement process, staff across all sites and local GP practices have been informed and offered the opportunity to provide feedback on the proposals.

1.2.7 A map showing the locations of the surgeries is shown as *Appendix 1*.

2. Background

2.1 The practice demographics are as follows:

	Priory Medical Group	Abbey Medical Group
No. of Partner GPs	14	7
No. of Salaried GPs	16	1
No. of sites	6	3
No. of patients	41,000	10,000

2.2 All GPs will be able to work across all 9 sites to ensure continued service delivery, which will enable better continuity of care to patients.

2.3 The practice are hopeful patients who attend all sites will continue to visit the practices and feedback from the engagement exercise has been strongly positive and supportive to the proposals (74.5% responses) with 7.5% responses opposed to the merger. A total of 17.8% of responses asked questions/or expressed no opinion. The full report produced by Priory Medical Group is shown at *Appendix 2*.

2.4 Both surgeries have car parks for utilisation by both staff and patients. If and when these are full, on-street car parking is available also. All sites are also easily accessibly via public transport.

3. Staffing

- 3.1 The practices are planning to utilise their existing staff across all sites. No redundancies or loss in staffing numbers are planned.

4. Medication/Pharmacies

- 4.1 Neither practices dispense to patients and this will not change.
- 4.2 There are a number of Pharmacies covering all 9 sites where prescriptions can be dispensed to patients.
- 4.3 The contact details of all the nearby Pharmacies have been included within the Question and Answer document and sent to both patients and stakeholders.

5. Alternative Local Provision

- 5.1 There are a number of GP practices within the area where patients could register with if they choose to seek an alternative surgery, namely:
- Dr Price & Partners, University Health Centre, University of York, Heslington
 - Dr Burgess, 3a Whitby Drive, York
 - Dr Murray, 89 East Parade, York
 - Clifton Medical Practice, Water Lane, York
 - Gale Farm Surgery, 109-119 Front Street, Acomb, York
 - York Medical Group, Monkgate, York
- 5.2 It is hoped that all patients will continue to stay with both Priory Medical and Abbey Medical Group; however any patients wishing to move to another practice would be supported in doing so.

6. Engagement

- 6.1 Agreement to the proposal has been given in principle from the PCT.
- 6.2 To support the engagement process, a comprehensive Stakeholder Engagement & Communication Plan has been written jointly by Priory Medical Group and Abbey Medical Group along with the PCT (see *Appendix 3*).
- 6.3 Priory Medical Group and Abbey Medical Group have been advised the PCT expects a form of engagement to be undertaken. The process has been clearly identified and outlined (see *Appendix 4*). The PCT has supported the practices to ensure the engagement process was followed.
- 6.4 The Stakeholder Engagement & Communication Plan has been implemented by the practice and feedback from patients and stakeholders was submitted to the PCT in August 2012. This information will be used to inform the PCT the views and opinions expressed by patients, the public and stakeholders when making its decision on whether to grant permission to merge the surgeries in late 2012.
- 6.5 All staff within the practice have been informed and advised of the plans and are supportive of the proposed merger.
- 6.6 Patients received letters, along with comments cards and a Question & Answer document advising of the proposal to merge both surgeries. Patients and stakeholders have been asked to feedback comments through the following ways:
 - By completing the comments cards attached with the letters and returning to the reception desk at any of the surgeries
 - By returning the comment card to the Practice Manager
 - By email to the practice

- Through the PALs team at NHS North Yorkshire & York
- 6.7 A stakeholder letter has been sent out to the local Council, Parish Councillors, other local stakeholders including GP surgeries, Pharmacies, the District Nurse Manager, voluntary sector etc, along with comment cards for feedback and a Question & Answer section.
- 6.8 Posters were placed on notice boards at all sites whilst letters, comments cards and a Question & Answer documents were made available for patients at all the sites.
- 6.9 The percentage of positive patient responses has been high, with approximately 544 responses received in total.

7. Timeline

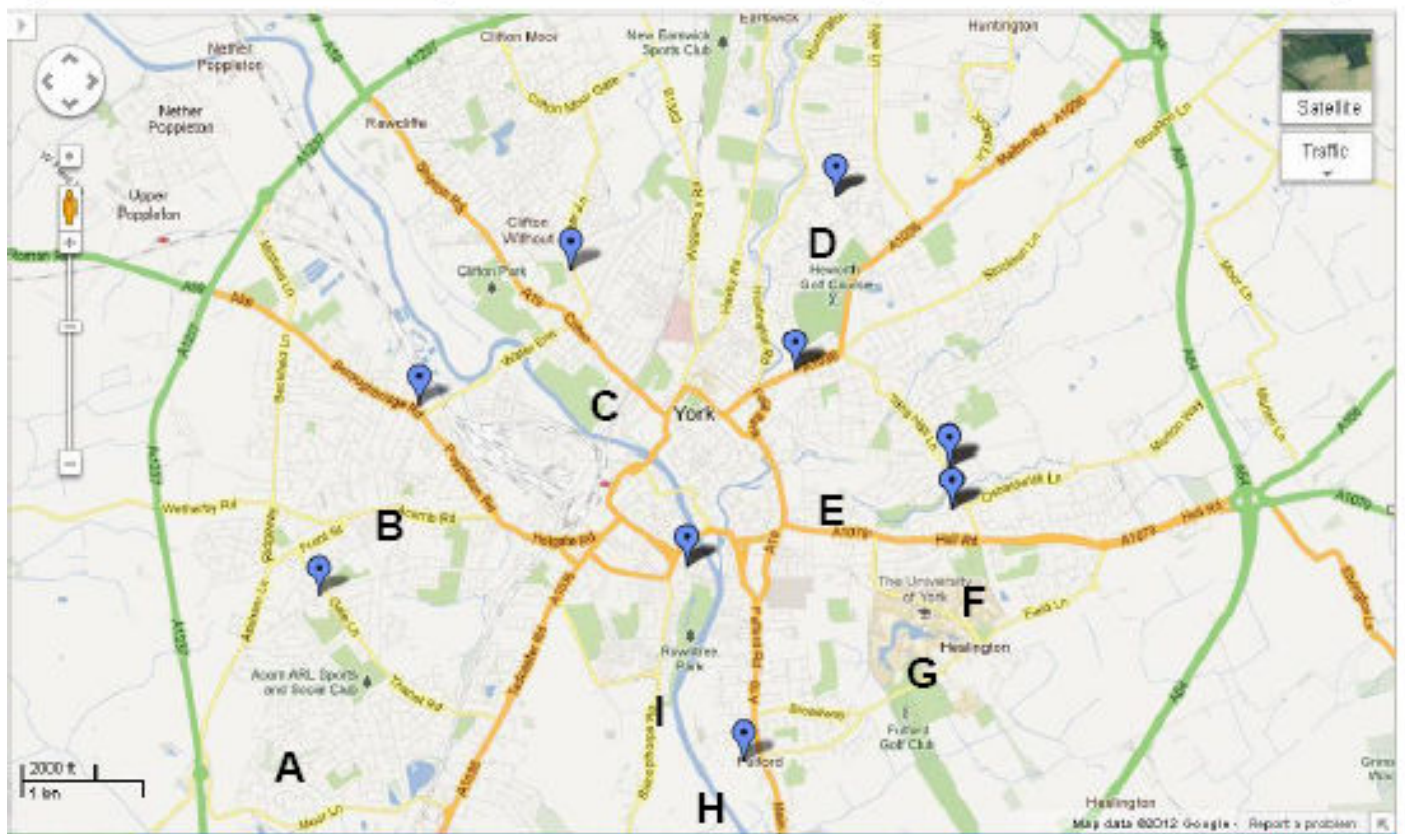
- 7.1 A timeline has been recommended to ensure the comprehensive engagement process is undertaken within due course, as follows:
- A 3 month patient and stakeholder engagement exercise (to commence 1st April 2012 and to be completed by 30th June 2012).
 - The practice collated and analysed all patient and stakeholder feedback and submit a report to the PCT for consideration in August 2012.
 - Analysis of the stakeholder feedback to be reported to the Primary Medical Services Commissioning Group (PMSCG) in November 2012.
 - If the Primary Medical Services Commissioning Group (PMSCG) grant permission for the practices to merge, the practice to write to patients, giving notice of impending merger date of the 1st April 2013.

8. Branch Surgery Merger Process

- 8.1 An initial practice visit was undertaken by the PCT to discuss the process upon receipt of the practices request. The meeting was to ensure the practice were aware of the Trust's requirements and process to follow for engagement for consideration of their request to be given.
- 8.2 A record of the key milestones is shown as *Appendix 3* which outlines the process followed by the practices for audit purposes.

Locations of Priory Medical Group and Abbey Medical Group Surgeries Appendix 1

A Priory Medical Centre Comlands Road Acomb York, YO24 3WX	B Lavender Grove Surgery Boroughbridge Road York, YO26 5RX	C Rawcliffe Surgery Water Lane Clifton York, YO30 6ND
D Victoria Way Surgery 2 Victoria Way Huntington York, YO32 9GE	E Heworth Green Surgery 45 Heworth Green York, YO31 7SX	F Tang Hall Lane Surgery 190 Tang Hall Lane York, YO10 3RL
G Parkview Surgery 28 Millfield Avenue Hull Road York, YO10 3AB	H Fulford Surgery 2 Fulford Park York, YO10 4QE	I Clementhorpe Health Centre Cherry Street York, YO23 1AP



Appendix 2

Collation and results of the patient/stakeholder engagement exercise produced by Priory Medical Group.



Abbey Medical and Priory Medical merger public consultation

On 29th March 2012 Abbey Medical Group and Priory Medical Group wrote to all registered patients aged 16 and over. Simultaneously, notification of the proposed merger was announced in all surgery waiting rooms and on surgery websites. An article covering the proposed merger was also published in the York Press on 7th April 2012. The public consultation exercise closed on 1st July 2012.

Patients were invited to provide feedback in response to the merger proposals either in writing or electronically. The table below details the number of patients contacted and the resulting responses.

Public Consultation Statistics

Number of patients contacted	41,546	
Total Number of responses received	544	
Written responses		
Positive response	348	As %'age of Total 63.9%
Negative response	34	6.2%
No opinion expressed/questions	67	12.3%
Electronic responses		
Positive response	58	10.6%
Negative response	7	1.3%
No opinion expressed/questions	30	5.5%

Summary of Results

Of the 544 results received the overwhelming view was positive with 74.5% in favour of the merger. Just 7.5% of respondents were opposed to the Practices merger. A further 17.8% responses were received that offered neither a positive or positive view and/or simply requested clarification re aspects of the merger.

In response to similar questions being asked from many patients we created a "Frequently Asked Questions" page on our website. The aim of this was to address common concerns from patients and also enable them to make a more informed decision with regards the merger.

A copy of the "Frequently Asked Questions" can be found at **Appendix A**.

Key themes emerging from feedback

Many patients took the opportunity to express opinions on current services and also raise questions about the future. The key themes that arose from the exercise can be summarised as follows:

Continuity of Care

A significant number of patients strongly expressed their desire to remain with the same GP, some of whom had a relationship with their GP for over 10 years. Both Abbey and Priory Medical group place tremendous value on the Doctor – Patient relationship and it is our intention to maintain, and where possible, improve continuity of care across the combined Practice.

Closure of existing Surgeries

Many patients voiced concerns that their usual surgeries would be closed as a result of the merger resulting in more difficult or inconvenient access to GP services.

Surgery locations

A similar number of patients advised that they wished to continue to use their existing surgery and not have to travel to other surgeries. As no surgeries are being closed as a result of the merger, it is the intention that all patients will continue to attend their usual surgery unless they specifically wish to change to a surgery that is more convenient for them.

Many patients were unsure as to the location of either the Abbey or Priory surgeries. In response a combined map was created illustrating all of the 9 surgeries along with addresses. This was also published alongside the Frequently Asked Question and a copy can be found in **Appendix A**.

Health and Social Care Bill

A number of patients asked if the merger was in direct response to the Health and Social Care Bill. Patients were reassured that merger discussions pre-dated the bill and were not politically motivated. The motivation behind the merger is to be able to deliver an improved service to a wider group of patients in a cost effective manner.

Stakeholder Feedback

13 stakeholders comprising of suppliers, financiers and third party organisations were contacted to establish their views on the merger. The response was disappointing with very few being received. Of those who did respond the view was generally positive with the merger being seen as an opportunity to simplify processes and procedures or achieve economies of scale.

Appendix 3

Stakeholder Communication and Engagement Plan

Priory Medical Group and Abbey Medical Group Surgeries - Proposal to merge

Engagement process: began w/c 1st April 2012 (3 month engagement)

Dates for feedback/comments from Stakeholders: w/ending 30th June 2012

1. Who are our Stakeholders and what level of engagement is required?

No.	Stakeholders	Type of Involvement
1.	Patients across both sites	Raise awareness. Give information. Opportunity to comment and feedback. Give information about how to register with alternative practice if plans go ahead. Feedback on results of engagement and decision-making process.
2.	Practice staff at both sites	Raise awareness. Opportunity to comment and feedback. Opportunity to change working arrangements (e.g. reception staff hours). Feedback on results of engagement and decision-making process.
3.	North Yorkshire Health Overview and Scrutiny Committee	Raise awareness. Opportunity to comment and feedback.

4.	Other public/ community representatives and partners – e.g. local Councils, Parish Councillors, other local stakeholders including GP surgeries, Pharmacies, local Network, the District Nurse Manager, voluntary sector etc.	Raise awareness. Opportunity to comment and feedback.
5.	Neighbouring Practices	Raise awareness. Agreement to take on patients who don't wish to move. Opportunity to comment and feedback.
6.	NYY Primary Medical Services Commissioning Group (PMSCG)	Awareness. Provides input. Review evidence. Makes recommendations/decision-makers based on evidence and views expressed.
7.	NHS NYY Board/Directors	Awareness. Decision-makers if appropriate.
8.	NY LMC	Awareness. Opportunity to comment and feedback.
9.	NY LPC and NY LOC	Awareness. Opportunity to comment and feedback.
10.	SHA	Awareness.
Support to Practice		
11.	NHS NYY Primary Care Commissioning and Contracting staff	Provide advice, lead through process.
12.	NHS NYY Engagement and Communication Teams	Provide advice and support with Stakeholder Engagement and Communication Plan.
13.	Locality Director	Awareness and support.

2. Overview of Key Milestones and Timetable

No.	Timeline	Stakeholder	Action	Engagement/Communications activity	Lead responsibility
1.	September/ October 2011	Practice staff	Advised practice staff at both practices. As the proposals have been ongoing with previous discussions around merging the practices together, all practice were already aware and in support of a merger.	<ul style="list-style-type: none"> Staff invited to ask questions at any time 	Practice
2.	October 2011	NHS NYY	Request made to NHS NYY to merge both surgeries and consolidate services.		Practice

3.	October 2011	NHS NYY & Practice	Discussions held with practice manager over progression and moving forward.	<ul style="list-style-type: none"> • Identified a practice visit would be appropriate between the PCT, GP partners and practice manager. • Briefly outlined the process and requirements needed: <ul style="list-style-type: none"> • Patient letter • Stakeholder letter • Q&A • Notice to be displayed at both sites • Stakeholder Engagement & Communication Plan 	PCT & Practice
4.	1 st November 2011	NHS NYY & Practice	Practice visit undertaken with Commissioning Manager	<ul style="list-style-type: none"> • The PCT met with both GP Partners and the practice manager to talk through the proposals and agree a way forward. 	PCT & Practice

5.	15 th November 2011	NHS NYY Primary Medical Services Commissioni ng Group (PMSCG)	Letter sent to practice from NHS NYY confirming agreement to commence engagement process and confirming support to undertake process.	<ul style="list-style-type: none"> • Letter sent to GP partner, practice manager and both NYY Locality Directors for York. 	PCT
6.	November/ December 2011	PCT & Practice	Discussions between PCT and Practice Manager to review the draft documentation prepared.	<ul style="list-style-type: none"> • Discussions to agree wording for engagement documentation before implementation. 	PCT & Practice
7.	On-going	Reception staff	Regular meeting of reception staff	<ul style="list-style-type: none"> • Update given and staff requests noted 	Practice Manager
8.	On-going	Admin and Nursing Staff	Regular meetings of Admin and Nursing Staff	<ul style="list-style-type: none"> • Updates to be provided and opportunities to comment and raise queries 	Practice Manager

9.	w/c 1 st April 2012	Patients	Statement of proposals and reasons to merge practices made available.	<ul style="list-style-type: none"> • Display of Notices at both sites • Copies of letters made available for patients to take home and read 	Practice
10.	w/c 1 st April 2012	Patients & stakeholders	Letter sent to patients and stakeholders, along with comments cards and a Q&A outlining the reasons behind the proposals and invitation to comment sent out.	<ul style="list-style-type: none"> • Letters posted to all patients, aged 16 years and over. Accepted that some households will receive multiple letters. • To ensure patient confidentiality, it was not appropriate to send a letter out to one person at each address. • Letters are also available from each reception desk. • Stakeholder letter to all stakeholders for consideration and comment. 	Practice & PCT

11.	30 th June 2012	All patients & stakeholders	End date for receipt of comments	<ul style="list-style-type: none"> • Collation of comments and feedback • Report to be produced 	Practice with support from PCT
11.	Ongoing	NHS NYY Primary Medical Services Commissioning Group (PMSCG)	Update presented to the PMSCG	<ul style="list-style-type: none"> • Paper to outline practice request and include update on current engagement process position. • Receive all feedback • Consider all evidence, including feedback from Stakeholders and OSC • Make decision to approve Practice plans, practice to keep open, or practice to appeal refusal notice. 	PCT
12.	November 2012	North Yorkshire Health Overview and Scrutiny Committee	Paper to be submitted to O&S on proposals	<ul style="list-style-type: none"> • Paper for consideration by the O&S • Inclusion of Stakeholder Communication and Engagement Plan, Key Milestones, and summary of feedback. 	PCT

13.	October/ November 2012	PCT	Write to Practice	<ul style="list-style-type: none"> • Formal letter to be sent to practice outlining decisions made at PMSCG and comments and feedback taken into consideration. • If approval given, practice asked to write to all patients advising of decision and giving formal notice of merger, alternatively giving practice options to appeal against decision. 	PCT
14.	November/ December 2012	All Patients & stakeholders	Feedback results of engagement and decision made to all patients and stakeholders	<ul style="list-style-type: none"> • Write to patients advising of decision made • Practice website to include information about decision made and feedback received • Notices available in GP premises • Email to external stakeholders 	Practice & PCT

3. Information to be available:

- Letter to Patients including a Q&A with contact details for both practices and an email address to send comments to as well as the Comments Card
- Comments Card for patient feedback
- Letter to external stakeholders with comments card and practice address to write to
- Information available on NHS Choices websites at <http://www.nhs.uk> including information about the practices proposal, dates, how to comment, and when decision will be made
- In November 2012, report, summary of feedback, and final decision to be made available

Appendix 4

FLOW CHART PROCESS FOR APPLICATIONS TO CLOSE BRANCH SURGERIES

Practice contacts AD of Primary Care to request closure of a branch surgery



PCT forward application form with guidance documentation outlining the process



Practice to complete and return application form to PCT



Practice visit to be undertaken by PCT to discuss application and way forward and outline and address any concerns, areas to work through by either party to enable progression of application. Discussions may also be necessary with other practices nearby



Paper to be taken to PMSCG outlining initial application and process



Public Engagement team contacted and informed of application form. Development of Stakeholder Engagement & Communication Plan with practice and identify and advise on recommended length of engagement process



Engagement process with patients and stakeholders to begin



NYCC O&S - paper to be taken formally by AD of Primary Care or Director of Localities



Practice to record, collate and analyse stakeholder feedback and return to PCT for consideration



Analysis of engagement to be fed into a paper and taken to the PMSCG and NYCC O&S to be updated
PMSCG to consider patient/stakeholder feedback and make formal decision on whether to close practice