

## Health and Adult Social Care Overview and Scrutiny Committee



Report subject	<b>NHS Dorset Report – Merger of The Quarterjack Surgery, Wimborne and The Old Dispensary, Wimborne</b>
Meeting date	4 March 2024
Status	Public Report
Executive summary	NHS Dorset have received an application to merge Practices from the Old Dispensary and Quarterjack Surgery in Wimborne.
<b>Recommendations</b>	<b>It is RECOMMENDED that:</b>  The Health and Adult Social Care Overview and Scrutiny Committee scrutinise the contents of this report and raise any questions at a subsequent committee meeting with the commissioners.
Reason for recommendations	As members of NHS Dorset Integrated Care Board, we have a joint duty to work together on matters relating to the planning, provision and operation of health services in Dorset.

Portfolio Holder(s):	<i>For Council to update</i>
Corporate Director	Kate Calvert, Acting Chief Officer, Commissioning, NHS Dorset Rob Payne, Deputy Director of Strategic Commissioning, NHS Dorset
Contributors	Celia Canter, Project Lead, NHS Dorset
Wards	
Classification	For information

## 1. Background

- 1.1 Small Practices are finding it increasingly difficult to recruit to their clinical GP workforce or attract clinical partners. This is a national issue and Dorset has seen many of its GP Practices merge to become more sustainable and attractive to recruiting clinicians.
- 1.2 The Old Dispensary was at risk of closure in 2023 following concerns raised by CQC and the removal of the GP partner. Quarterjack Surgery stepped in to take on the contract and sustain the service. The logical next step is to merge both contracts into one.
- 1.3 The Old Dispensary (registered population 3458) and Quarterjack Surgery (registered population 15609) are part of Wimborne and Ferndown Primary Care Network (PCN).
- 1.4 A formal application to merge has been submitted to NHS Dorset for approval.
- 1.5 The merger will eliminate the current risk of Old Dispensary closure, the loss of local primary care estate and patients otherwise being reallocated to another GP Practice.
- 1.6 Primary Care is an increasingly challenging environment in which to sustain a viable business model. The merger will greatly improve resilience for both Practices and provide an opportunity to make more efficient use of joint resources to protect and enhance front line patient care.
- 1.7 Patients will be able to choose whether to be seen at either surgery, and access to a wider range of clinicians and clinical services from a combined team.
- 1.8 Staff welfare will improve with a larger and more resilient team.
- 1.9 Both Practices are working from a single 'implementation plan'.

- 1.10 The newly merged Practice will continue to provide Primary Medical Services from the existing current locations.
- 1.11 Other than the blending of the inner and outer boundaries, there are no further changes.

## **2. Review of the Process & Outcomes**

- 2.1 The application to merge was approved by the Primary Care Commissioning Committee (PCCC) held on 20 July 2023. As part of this process, the proposal has been considered by members of the Primary Care Operational Group (PCOG) including the Local Medical Committee and was supported.
- 2.2 Both Practices have confirmed that they have taken both legal and financial advice regarding the proposed merger.
- 2.3 The Practices have contacted PCN colleagues to inform of their intentions.
- 2.4 NHS Dorset have informed Public Health England regarding screening cycles. At present there are no particular concerns as early indications are that patients across the different Practices are in the same cohorts.

## **3. Primary Care Network (PCN) Changes**

- 3.1 There are no planned changes to the PCN.

## **4. Stakeholder Engagement**

- 4.1 Patient and stakeholder engagement will be undertaken with the Practices through staff meetings and communications, meetings with the Patient Participation Group and texts or letters to patients.
- 4.2 Practice websites and social media will be a further source of information.

## **5. Service Provision**

- 5.1 NHS Dorset is assured that all service provision will continue to be accessible to patients across the merged Practices.

## **6. Summary of legal implications**

- 6.1 There are no legal implications.

## **7. Summary of human resources implications**

- 7.1 Some staff may be eligible for redundancy payments.

## **8. Summary of environmental impact**

- 8.1 No environmental change implications identified.

## **9. Summary of public health implications**

9.1 The merger aims to sustain access to General Practice for patients in this highly populated area.

## **10. Summary of equality implications**

10.1 An Equality Impact Assessment (EIA) has been completed:

- No perceived impact on race/ethnicity or nationality; religion or beliefs; gender or sexual orientation;
- No perceived impact on staff who will be transferred under Transfer of Undertakings Protection of Employment (TUPE). There will be opportunities for staff to work as part of a combined team, with access to leadership and skills;
- No perceived negative impact on patients. On the contrary they will have greater choice of GPs with a broader range of skills and greater choice about where they access care across both sites.

## **11. Summary of risk assessment**

11.1 Risk assessment:

<b>Theme</b>	<b>Risk</b>	<b>Mitigation</b>
Completion of the merger	If the merger does not complete there is a risk that the Old Dispensary will close.	Both Practices have common partners and there is a robust leadership model already in place.
Destabilising Quarterjack Surgery	The vulnerability of the Old dispensary may adversely impact on the Quarterjack Surgery if the current number of clinical partners and employed GPs are not maintained.	There will be regular contract review meetings with the merged practice and also monitoring by CQC.

## **12. Background papers**

12.1 No background papers attached.

## **13. Appendices**

13.1 No appendices attached.