

Agenda Item 10

Report to:	Primary Care Commissioning Committee
Date of Meeting:	29 th May 2018
Subject:	Practice Merger (Roxton/Drs Opie and Spalding)
Presented by:	Julie Wilson, North East Lincolnshire CCG
Report Author:	Erica Ellerington, NHS England

STATUS OF THE REPORT (*auto check relevant box*)

For Information	<input type="checkbox"/>
For Discussion	<input type="checkbox"/>
For Approval / Ratification	<input checked="" type="checkbox"/>

PURPOSE OF REPORT:	<p>With effect from 1st April 2018, Drs Opie and Spalding hold the contract for the former Medi-Access Ltd contract, as previously approved by the Joint Co-Commissioning Committee.</p> <p>This report is to seek approval for;</p> <ol style="list-style-type: none"> Following Drs Opie and Spalding inclusion on the former Medi-Access Ltd contract, approve the request for partners of the Roxton Group Practice contract to now be included. Approve formal merger where the patient list for Dr Opie & Spalding (formerly Medi-Access Ltd, B81693) will merge into the Roxton Practice (B81039) patient list. Dr Opie & Spalding are already partners in the Roxton Practice. <p>Consultation with patients and stakeholders is now complete, and for information, the report provided to the North East Lincolnshire Overview and Scrutiny Committee is attached.</p>
Recommendations:	<p>It is recommended that the Primary Care Commissioning Committee approve the;</p> <ol style="list-style-type: none"> Contract variation to include all partners of the Roxton Practice in the Medi-Access Ltd contract (for process completeness) Formal merger between Drs Opie & Spalding (former Medi-Access Ltd) and the Roxton Practice lists.
Sub Committee Process and Assurance:	N/A
Implications:	
Risk Assurance Framework Implications:	The CCG and NHS England are working closely with the practice to ensure that risk is managed appropriately with regards to contractual, financial and patient safety issues.
Legal Implications:	PMS (Primary Medical Services) contract requirements adhered to.

Equality Impact Assessment implications:	<p>An Equality Impact Analysis/Assessment is not required for this report <input checked="" type="checkbox"/></p> <p>An Equality Impact Analysis/Assessment has been completed and approved by the EIA Panel. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment <input type="checkbox"/></p> <p>An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section ____ of the enclosed report <input type="checkbox"/></p>
Finance Implications:	There are no financial issues to the CCG, and financial implications to the practice regarding this merger have been managed directly with the practice
Quality Implications:	N/A
Procurement Decisions/Implications (Care Contracting Committee):	N/A
Engagement Implications:	Patient and stakeholder engagement has taken place and is detailed within this report.
Conflicts of Interest	<p><i>Have all conflicts and potential conflicts of interest been appropriately declared and entered in registers which are publicly available?</i></p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
Links to CCG's Strategic Objectives	<p>(Auto check relevant boxes)</p> <p><input checked="" type="checkbox"/> Sustainable services <input type="checkbox"/> Empowering people</p> <p><input checked="" type="checkbox"/> Supporting communities <input type="checkbox"/> Delivering a fit for purpose organisation</p>
NHS Constitution:	https://www.gov.uk/government/publications/the-nhs-constitution-for-england
Appendices / attachments	Copy of report provided to the Overview and Scrutiny Committee

Template for Practice Merger

1. Explanation of the practice merger

Practices should provide an overview below of how the practices are merging. Paragraph 11.4 of the Contract Variations chapter provides common models of practice mergers and may be helpful here but practices should recognise that mergers are not restricted to one of the models listed and proposed mergers may adopt elements of more than one model or may adopt an entirely different approach.

The proposal is for a formal merger where the patient list for Dr Opie & Spalding (formerly Medi-Access Ltd, B81693) will merge into the Roxton Practice (B81039) patient list. Dr Opie & Spalding are already partners in the Roxton Practice.

2. Practices' characteristics and intentions for the merged practice

	Current Practice 1	Current Practice 2	Merged Practice
Name and address of practice (provide name and address)	The Roxton Practice Pilgrim Primary Care Centre Pelham Road Immingham DN40 1JW	Dr Opie & Spalding (formerly Medi-Access Limited) Weelsby View Health Centre Ladysmith Road Grimsby DN32 9SW	The Roxton Practice Pilgrim Primary Care Centre Pelham Road Immingham DN40 1JW
Contract type (GMS, PMS, APMS)	PMS	PMS	PMS
Name of contractor(s)	Dr Peter Opie Dr Anne Spalding Dr Peter Melton Dr Sean Thrippleton Dr Ekta Elston Dr David Lansley Dr Lee Guest Dr Matthew Tucker Dr Laura Bernal-Gilliver Dr Lyndsey Cunningham	Dr Peter Opie Dr Anne Spalding	Dr Peter Opie Dr Anne Spalding Dr Peter Melton Dr Sean Thrippleton Dr Ekta Elston Dr David Lansley Dr Lee Guest Dr Matthew Tucker Dr Laura Bernal-Gilliver Dr Lyndsey Cunningham
Location (provide addresses of all premises from which practice services are provided)	Pilgrim Primary Care Centre Pelham Road Immingham DN40 1JW Weelsby View Health	Weelsby View Health Centre Ladysmith Road Grimsby DN32 9SW	Pilgrim Primary Care Centre Pelham Road Immingham DN40 1JW Weelsby View Health

	Centre Ladysmith Road Grimsby DN32 9SW The Health Centre Pelham Crescent Keelby DN41 8EW		Centre Ladysmith Road Grimsby DN32 9SW The Health Centre Pelham Crescent Keelby DN41 8EW
Practice area (provide map of area)			
List size (provide figure)	21,184	2,484	23,668 Please note Roxton also has APMS contract in the WVHC for another 3,590 patients
Number of GPs and clinical sessions (provide breakdown)	Dr Peter Opie – 5 clinical sessions Dr Anne Spalding – 7 clinical sessions Dr Peter Melton – 5 clinical sessions Dr Sean Thrippleton – 5 clinical sessions Dr Ekta Elston – 5 clinical sessions Dr David Lansley – 8 clinical sessions Dr Lee Guest – 7 clinical sessions Dr Matthew Tucker – 7 clinical sessions Dr Laura Bernal-Gilliver – 7 clinical sessions Dr Lyndsey Cunningham – 4 clinical sessions Dr G Borman – 7 clinical sessions Dr D Bouzebra – 6 clinical sessions Dr R Sparling – 4 clinical sessions Dr J Cowling – 6 clinical sessions Dr H Jethwa – 3 clinical sessions	Dr E Amin – 9 clinical sessions	Dr Peter Opie – 5 clinical sessions Dr Anne Spalding – 7 clinical sessions Dr Peter Melton – 5 clinical sessions Dr Sean Thrippleton – 5 clinical sessions Dr Ekta Elston – 5 clinical sessions Dr David Lansley – 8 clinical sessions Dr Lee Guest – 7 clinical sessions Dr Matthew Tucker – 7 clinical sessions Dr Laura Bernal-Gilliver – 7 clinical sessions Dr Lyndsey Cunningham – 4 clinical sessions Dr G Borman – 7 clinical sessions Dr D Bouzebra – 6 clinical sessions Dr R Sparling – 4 clinical sessions Dr J Cowling – 6 clinical sessions Dr H Jethwa – 3 clinical sessions Dr E Amin – 9 clinical

			sessions
Number of other practice staff (provide breakdown)	Managing Director 1wte Pharmacists 1.8 wte HCA 9.8 wte Dispensers and Mgt 9.2 wte Reception 17.2 wte Admin 13.3 wte	Practice Manager 0.5 wte Admin 3.0 wte	Managing Director 1wte Practice Manager 0.5wte Pharmacists 1.8 wte HCA 9.8 wte Dispensers and Mgt 9.2 wte Reception 17.2 wte Admin 16.3 wte
CCG area(s) (list CCG(s) in which practices are located)	NE Lincs	NE Lincs	NE Lincs
Which computer system/s (list system(s) used)	TPP	TPP	TPP
Clinical governance/complaints lead and systems (provide names)	Dr Spalding Dr Bernal-Gilliver	Dr Spalding	Dr Spalding Dr Bernal-Gilliver
Training practice (yes/no)	Yes	No	Yes
Opening hours (list days and times)	Monday 8.00 – 20.00 Tuesday 8.00 – 20.00 Wednesday 8.00 – 18.30 Thursday 8.00 – 20.00 Friday 8.00 – 18.30	Monday 8.00 – 18:30 Tuesday 8.00 – 18:30 Wednesday 8.00 – 18.30 Thursday 8.00 – 18:30 Friday 8.00 – 18.30	Monday 8.00 – 20.00 Tuesday 8.00 – 20.00 Wednesday 8.00 – 18.30 Thursday 8.00 – 20.00 Friday 8.00 – 18.30
Extended hours (list days and times)	Yes see above	No	Yes see above
Enhanced services (list all enhanced services delivered)	Minor Surgery Skin Cancer INRL4 Learning Disabilities Urology Wound care Near Patient Testing Phlebotomy	Learning Disabilities Urology Wound care Near Patient Testing Phlebotomy	Minor Surgery Skin Cancer INRL4 Learning Disabilities Urology Wound care Near Patient Testing Phlebotomy
Premises	Leased	Leased	Leased

(for each premises listed above, indicate whether premises are owned or leased and provide details of the terms of occupation)	FRI lease	FRI lease	FRI lease
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2. Patient benefits

Please explain below the consequences of the proposed practice merger for patients. You should include comments on any benefits or adverse effects on patients in relation to matters such as access to services and service delivery arrangements.

Underpins the resilience of the practice and the clinical team going forward.

Secures access to female GP's and clinicians for patients across all sites.

Expanding work with clinical training for Medical Students and GPs

Support the development of the skill mix of the practice clinical team to include pharmacists, physician associates and physiotherapists.

Ensures access to a wider range of clinical services to patients with specialist skills (diabetes nurses, COPD nurses etc). Specialist nurses will be available at WVHC for former Medi-Access patients.

Supports recruitment of GP's and other clinical staff in the future

Merging into a group practice with a strong track record of providing high quality care for its patients.

Merging into a group practice with a 'Good' CQC rating, the previous provider (Medi-Access) rated as 'Requires Improvement'.

Ability to deliver services at scale.

3. Financial considerations

Please provide comments **from a financial perspective** on the following matters if they are relevant to the proposed practice merger. **Practices to decide between themselves in relation to costs pre-merge that are paid post-merge**

Premises	Subject to the merge being granted Roxton Practice will engage with the WVHC landlord with a view to taking responsibility for the lease. Negotiation will follow to redevelop the building, including modern refurbishment to make it fit for purpose for delivery of at scale services including 8-8 extended access.
IT	Practice to seek non recurrent support for the costs relating to the TPP merge as this now falls outside of core IT.
TUPE	Staff will TUPE

Please provide comments **from a financial perspective** on the following matters if they are relevant to the proposed practice merger. **Practices to decide between themselves in relation to costs pre-merge that are paid post-merge**

Redundancy	Non planned however review of total workforce required to meet needs of the service in future.
QOF	Roxton has track record in improving achievement from previous merger.
Pension/seniority	n/a
MPIG/PMS Premium	n/a
Dispensing	Continues for relevant patients.

4. Service delivery

Please provide comments **from a service delivery perspective** on the following matters if they are relevant to the proposed practice merger.

QOF	Roxton have dedicated QOF manager and GP partner lead. Achievement gained through enhanced skills through specialist nurses for chronic disease.
Access	New practice will adopt Roxton appointment system enabling pre booking and urgent care on the day appointments.
Primary Care Web Tool	n/a
Recent of ongoing breaches of contract	n/a
Recent or pending CQC matters	Medi-Access recently rated as requiring improvement, plans to adopt Roxton (Good rated) operations.
If one practice's service delivery is of a lower standard, is there a proposal to improve performance	<p>Medi-Access were rated at requiring improvement on 15/02/18 (inspection 11/12/17): specific plans to tackle the issues identified in the report are as follows:</p> <ul style="list-style-type: none"> - infection control audits will systematically take place in future along with regular monitoring of cleanliness in line with Roxton's current process. - electrical safety checks systematically take place in future in line with Roxton's current process. - as a group practice with multiple GPs and other clinical staff, cover will always be available in house without the need to have skeleton cover or use of locums. - formal induction process will be implemented as per Roxton's

Please provide comments **from a service delivery perspective** on the following matters if they are relevant to the proposed practice merger.

	<p>current process.</p> <ul style="list-style-type: none"> - reviews of patients on high risk medicines will be carried out by Roxton Clinical Pharmacists and GP lead for dispensary/prescribing. - fridge temperature monitoring will follow current Roxton guidelines. - visions and business plans from Roxton will be adopted. All incoming staff will be briefed and have 'Roxton Buddy Book'. - GP partners from Roxton practice have defined leadership roles and this will include the new practice. - PPG will join with the existing Weelsby View Health Centre Group to work on behalf of the total patient list and the building itself.
Will there be any cessation of services post-merger?	No
Will there be a reduction of hours for which services are provided post-merger?	No.
Will there be a change in the hours at which services are provided?	Services will be available more as Roxton do not operate a half day closure/ on call arrangements.
Will there be a reduction in the number of locations or a change in the location of premises from services are provided?	No
Resilience – where the merged patient list is over 10,000, how will the practices ensure resilience to ensure that performance and patient experience is maintained and improved.	Roxton currently have list size of £20k+ so will continue to follow currently practice.

5. Patient and stakeholder engagement

Please provide comments on the following matters.	
Have the practices engaged with patients and/or stakeholders on the practice merger?	Yes
Do the practices intend to engage with patients/stakeholders?	Yes
When did/will you engage with patients/stakeholders?	January – February 2018
In what form did/will you engage with patients/stakeholders?	Letter to all patients. FAQ available on website and posters in waiting room. Comment cards. Email comments. Named contact at practice to field questions.
With whom did/will you engage?	Patients Local providers Landlord
If you have already carried out engagements, what was the outcome?	Some patients are nervous about the merger as they have been used to having access to the same GP for many years. Some patients recognise the need for change and successions planning. A very mixed response (further information in detailed report)

6. Contractual actions

Please provide below an explanation of any contractual variations that you consider are necessary to effect the proposed practice merger.
CV to move the patient list from B81693 to B81039. B81693 will cease to exist.

7. Procurement and competition

Please provide below any comments on the procurement and/or competition matters that may arise as a result of the proposed contract merger.

Please provide below any comments on the procurement and/or competition matters that may arise as a result of the proposed contract merger.

None

8. Merger mobilisation

Please set out below a step by step plan to the mobilisation of the merger if the business case is approved including what actions are required of the practices and third parties, such as commissioners, the order in which the actions need to be undertaken and timescales for the actions to be completed. A template mobilisation plan that can be used but will need to be amended to fit the proposed practice merger is set out at Annex 12B.



Due Diligence
Plan_MediaAccess.xlsx

9. Additional information

Please provide any additional information that will support the proposed practice merger.

Roxton has in the past two years merged with practice B81019 Dr Jethwa. This has provided resilience to the local workforce as Dr Jethwa has continued to work, maintaining continuity to patients. We intend for the same to happen with Dr Amin.

Report to
North East Lincolnshire Council – Health Scrutiny Panel

March 2018

Application by
The Roxton Practice (Dr Opie and Spalding)

Report Prepared by:
The Roxton Practice

1. Introduction

- 1.1 This document is to provide a briefing on the engagement process undertaken by the practices
- 1.2 **Proposal to merge**
 - 1.2.1 The Roxton Practice and Dr Opie and Spalding (formerly Medi-Access Limited) have requested to merge their practices.
 - 1.2.2 Both surgeries currently operate across sites, namely:

The Roxton Practice

Surgeries:

Pilgrim Primary Care Centre, Pelham Road, Immingham
Keelby Health Centre, Pelham Crescent, Keelby
Weelsby View Health Centre, Ladysmith Road, Grimsby*

** The Roxton Practice also holds an APMS contract to deliver services to the former Ashwood practice, practice list code B81603 within Weelsby View Health Centre.*

Dr Opie & Spalding (formerly Medi-Access Limited)

Surgeries:

Weelsby View Health Centre, Ladysmith Road, Grimsby

- 1.2.3 If agreement is given by the NHSE/CCG to merge, Dr Opie and Spalding (formerly Medi-Access Limited) will operate as satellite surgeries within the Roxton Practice and the combined practices will be known as The Roxton Practice.
- 1.2.4 An engagement exercise has been undertaken to obtain the views of patients and their feedback on the proposals will be taken into consideration by NHSE and North East Lincolnshire CCG within the Joint Co-Commissioning Committee when making its final decision on whether to allow the surgeries to merge.
- 1.2.5 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.
- 1.2.6 A map showing the locations of the surgeries is shown as *Appendix 1*

2. Background

2.1 The practice demographics are as follows:

	The Roxton Practice	Dr Opie and Spalding Practice (formerly Medi-Access Limited)
No. of Partner GPs	10	2
No. of Salaried GPs	3	0
No. of sites	3	1
No. of patients	21,497 **	2,484

*** There is also 3,590 patients registered with Roxton for the former Ashwood patient list so total current combined list size for The Roxton Practice is 25,087, increasing to 27,571 subject to the successful merger with Dr Opie and Spalding.*

- 2.2 All GPs will be able to work across all sites to ensure continued service delivery, which will enable better continuity of care to patients. Dr Amin from Medi-Access Limited will continue to provide services to the Roxton Practice for a period of two years, 6 months of which will be exclusively from Weelsby View Health Centre.
- 2.3 Feedback from the engagement exercise has been limited. A total of 1,362 letters were sent to patients and 13 replies received with 31% in favour of the merger, 23% were neutral and 46% of responses opposed to the merger. Including local provider responses, overall, 44% were positive, 38% negative, and 19% neutral.

The full report produced by The Roxton Practice 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 accessible via public transport.

3. Staffing

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

4. Medication/Pharmacies

- 4.1 The Roxton Practice dispense to patients at Immingham and Keelby sites. Dr Opie and Spalding (formerly Medi-Access Limited) do not dispense to patients registered at the Weelsby View surgeries and this will not change.
- 4.2 There are a number of pharmacies covering Immingham and Weelsby View 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 published on the Roxton Practice website (www.theroxtonpractice.nhs.uk).

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 Chalmers & Meier, Weelsby View Health Centre
- Dr Babu, Weelsby view Health Centre
- Dr A Kumar, Stirling Medical Centre
- Dr R Mathews, Stirling Medical Centre
- Dr J Raghwani, Stirling Medical Centre
- Humberview Surgery, Stirling Medical Centre
- Quayside, Cleethorpes Road (currently consulting to move premises to Open Door, Albion Street)

5.2 It is hoped that all patients will continue to stay with the merged practice; 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 subject to completion of satisfactory consultation and engagement programme.
- 6.2 To support the engagement process, a comprehensive Stakeholder Engagement & Communication Plan has been written by The Roxton Practice (see Appendix 3).
- 6.3 Roxton has been advised that NHSE expects a form of engagement to be undertaken. The process has been clearly identified and outlined. NHSE has supported the practices to ensure the engagement process was followed.
- 6.4 The Stakeholder Engagement & Communication Plan has been implemented by the practices and feedback from patients and stakeholders was submitted to NHSE on (27/03/18). This information will be used to inform both the CCG and NHSE of the views and opinions expressed by patients, the public and stakeholders when making its decision on whether to grant permission to merge the practices.
- 6.5 All staff within the practices 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 the Medi-Access Limited surgery
 - by email to the practice

- by writing to the practice
- by telephone to the Roxton Practice Managing Director

6.7 A stakeholder email has been sent out to the local providers.

6.8 The merger letter was displayed in the Medi-Access Limited waiting room.

7. Timeline

7.1 A timeline has been recommended to ensure the comprehensive engagement process is undertaken within due course, as follows:

- A 4 week patient and stakeholder engagement exercise (to commence 22/01/18 and to be completed by 23/02/18).
- The Practice collated and analysed all patient and stakeholder feedback and submit a report to Co-Commissioning Committee for consideration in April 2018
- If the committee grant permission for the practices to merge, the practice to write to patients, giving notice of impending merger date

8. Benefits of Merger

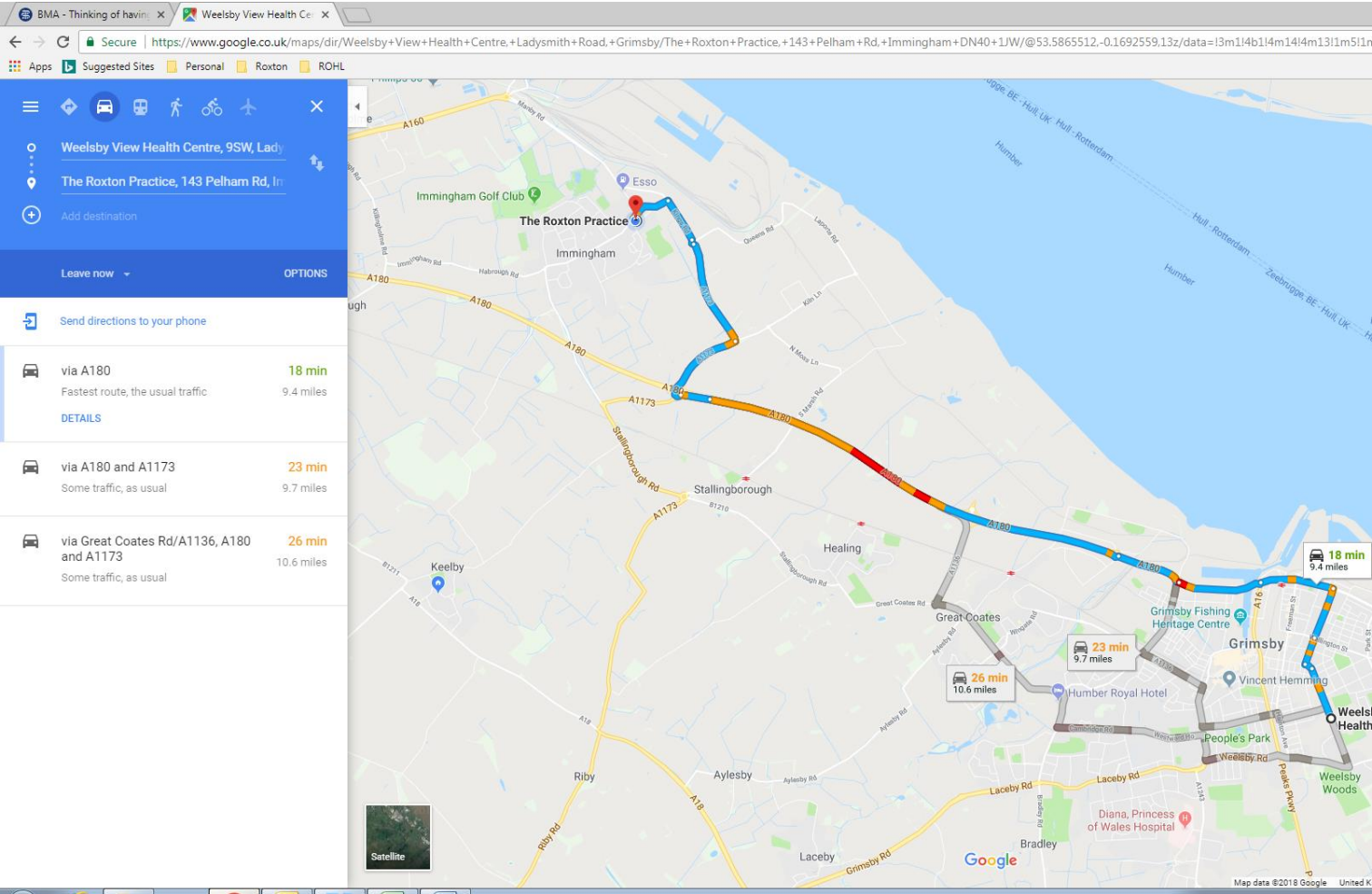
The following benefits have been identified through the merger:

- underpins the resilience of the practice and the clinical team going forward.
- secures access to female GP's and clinicians for patients across all sites.
- expanding work with clinical training for Medical Students and GPs
- support the development of the skill mix of the practice clinical team to include pharmacists, physician associates and physiotherapists.
- ensures access to a wider range of clinical services to patients with specialist skills (diabetes nurses, COPD nurses etc).
- supports recruitment of GP's and other clinical staff in the future

- merging into a group practice with a strong track record of providing high quality care for its patients.
- merging into a group practice with a 'Good' CQC rating. The new practice will ensure the delivery of an action plan to address and deliver the improvement required across the areas the CQC had identified with the previous provider as requiring improvement.

Appendix 1	Map
Appendix 2	Practice Engagement with Patient Report
Appendix 3	Stakeholder Engagement & Communication Plan

Appendix 1



Appendix 2

Practice Engagement with Patient Report

Total Comments	Positive	Neutral	Negative	Total
Patient	4	3	6	13
%	31%	23%	46%	100%
Provider	3	0	0	3
%	100%	0%	0%	100%
Total	7	3	6	16
%	44%	19%	38%	100%

1. 1,362 Letter sent to households registered with Medi-Acces Limited.

Ref	Patient Comments	+	-	neutral	+	-	neutral
1	If this merger takes place as long standing patients of Dr Amin, we wish to register that one will hope to continue to see Dr Amin whenever we seek a consultation.			1			
2	I don't agree with the merger of the Roxton Practice.		1				
3	I wouldn't mind my doctor moving to the Roxton Practice and Medi-Access we live close and I would like to stay with Dr Amin.			1			
4	I wish to stay at Weelsby Medical Centre on Dr Amin's surgery.			1			
5	When I received the letter via post about the merge with Roxton I was very disappointed, so much so I considered moving to another practice. Medi-Access is an extremely dedicated and passionate when it comes to the care of its patients and I do believe the the service would suffer if it was to merge with another practice. At Medi-Access I am able to see Dr Amin everytime that I need an appointment, also in most cases I can be seen the same day or have a telephone consultation. I do not believe this would be the case if the practice expanded this much. My conclusion is that I am not happy about this merger and feel the patients and the practice would suffer greatly. Thank you for allowing me to give my opinion.		1				
6	If these practices in Immingham and Keelby are to help us I don't say how they are far away places and not easy to get to. I have spent 20 mins on the phone recently trying to get an appointment waiting for engaged tone repeatedly dialing. Once I get an appointment its ok. We have not been given any info on how we will exactly benefit by it. I am happy with Dr Amin and always have been and don't feel good about any doctor who is not aware of my history.		1				
7	I was so disheartened and upset to receive this news. I left Roxton due to their terrible appointment bookings and the different doctors seen each visit. My husband is still with Roxton and has been trying for 6 months to get an appropriate appointment. It should be Rotten not Roxton.		1				
8	We have been partients of Dr Amin for 18+ years. Not happy to be getting another GP. But happy for Dr Amin to get some rest he finally deserves. All the best Dr Amin x		1				
9	Going with the times is fine as long as you can still see your own doctor and not wait 2-3 weeks it's ok by me getting other nurses as I haven't a lot of confidence in the one we have but whatever we say will happen.	1					
10	I have mixed feelings about this merger with having to deal with the Roxton Practice for my husband. Dr Amin's is better for appointments in getting one the same day not two weeks later.		1				
11	I am sure that the merger will ultimately benefit both the practice and the patients and lead to a more efficient service with more flexibility.	1					
12	Anything that improves the practice must be a good idea I'm all for improvement in any area of life, go for it.	1					
13	If this merger will benefit the practice I would welcome it providing that it does not detract from the service we already enjoy.	1					
		4	6	3	31%	46%	23%

Appendix 3

Stakeholder Communication and Engagement Plan

The Roxton Practice and Dr Opie and Spalding (formerly Medi-Access Limited) - Proposal to merge

Engagement process: began w/c 22nd January 2018 (1 month engagement)

Dates for feedback/comments from Stakeholders: w/ending 23rd February 2018



Consultation Letter
Jan 2018 Signed.pdf