

**Business Case for Proposed Contractual Merger**  
Please complete the following (Please add additional pages if you have insufficient room to complete fully)

Practices should provide an overview below of how the practices are merging e.g.

**Model 1:** GP providers agree loose arrangements such as sharing back office functions or management staff or may even create a new legal entity to manage and oversee the delivery of services under the GP contracts. This is not a formal merger and the contracts with the Commissioner will not change (this model is often referred to as a contractual joint venture).

**Model 2:** The GP partners from Practice A may join the partnership of Practice B and vice versa. The new partnership may continue to hold the two separate contracts but will have merged at an operational level.

**Model 3:** GP partners from Practice A join the partnership of Practice B and Practice A ceases trading. The Commissioner terminates Practice A's contract and varies Practice B's contract to include the services originally provided by Practice A. This may happen with more than two practices so that the larger partnership holds one larger contract for services originally provided by a number of practices under a number of contracts. The parties are likely to enter into a business transfer agreement for the transfer of assets and staff.

**Model 4:** GP providers come together to create a new legal entity (for example, the GP partners become shareholders of a new company limited by shares).

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.

**1. Details of the two contractual agreements you are proposing to merge**

Name and Address - Practice A		Name and Address - Practice B			
Broom lane medical centre 70 broom lane Rotherham S60 3ew		Broom Valley Medical Centre 102 – 104 Broom Valley Road Rotherham S60 2QY			
Practice Code		Practice Code			
C87012		C87621			
GMS/PMS		GMS/PMS			
PMS		PMS			
Training practice:	Yes	Training practice:	No		
Current list size:	13103	Current list size:	1814		
Clinical Governance/complaints lead and system		Clinical Governance/complaints lead and system			
Dr J sanders – clinical governance					
Dr r Cullen- complaints lead					
GPs		GPs			
Name	Role (Salaried, Partner)	WTE	Name	Role (Salaried, Partner)	WTE
DR R J CULLEN	PARTNER	1			
DR J SANDERS	PARTNER	.87	DR S KACKER	PARTNER	1
DR R KACKER	PARTNER	1			
DR U IDUKALLU	PARTNER	1			
DR V CAMPBELL	PARTNER	.87			
DR S LANGMEAD	PARTNER	1			
DR H DAVIES	SALARIED	.62			
DR C BARNSLEY	SALARIED	.68			



Other clinical staff		Other clinical staff	
Name	Role (Nurse Practitioner, HCA)	WTE	WTE
S Parker	NURSE	.75	
H Watson	NURSE	.97	
S Rackham	NURSE	.72	
S Beaver	NURSE	.95	
Z Blythe	NURSE	.72	
K Andrews	NURSE	.81	
A Hemingway	HCA	.77	
J Abell	HCA	.67	
T Mousley	HCA	.54	
Administrative staff			
Name	Role	WTE	WTE
ANDREA KITCHEN	Practice Business Manager	1	.54
S AITKEN	Site Supervisor	1	.54
J SANDERSON	Site Supervisor	1	.54
S CONNELL	Shift Lead	1	.54
L Allass	Receptionist	.43	.54
T Anderson	Receptionist	.67	.54
S Barrow	It Support	1	.13
C Boyes	Clerical Assistant	1	
S Garrow	Receptionist	1	
Administrative staff			
Name	Role	WTE	WTE
Broydon	Practice Manager		.54
Vickeraige			
Jayne Thompson	Receptionist		.54
Nazema Rheman	Receptionist		.54
Margaret Meeds	Receptionist		.54
Yvette Finney	Receptionist		.54
Margaret Meeds	Phlebotomist		.13

G Clarke	Receptionist	.65			
M Courtley	Receptionist	.67			
L Deehan	Receptionist	.67			
G Fiddes	Receptionist	.75			
A Francis	Receptionist	.67			
M Kaye	Secretary	.65			
W Lawton	Administrator	.74			
S Oxborough	Receptionist	.80			
M Pickering	Receptionist	.80			
L Spencerley	Receptionist	.67			



## 2. Current Premises Arrangements

Practice A Current Premises: Please list all sites the practice currently operates from

Site name & address	Owned or leased	If owned, name of owner(s)	If leased, name of landlord(s)	If leased, expiry date of lease
BROOM LANE MEDICAL CENTRE 70 BROOM LANE ROTHERHAM S60 3EW	owned	DR R CULLEN DR J SANDERS DR R KACKER DR U IDUKALLU DR V CAMPBELL DR S LANGMEAD		
KIMBERWORTH PARK MEDICAL CENTRE LANGDON WALK ROTHERHAM	owned	DR R CULLEN DR J SANDERS DR R KACKER DR U IDUKALLU DR V CAMPBELL DR S LANGMEAD		

**Practice B Current Premises: Please list all sites the practice currently operates from**

Site name & address	Owned or leased	If owned, name of owner(s)	If leased, name of landlord(s)	If leased, expiry date of lease
BROOM VALLEY MEDICAL CENTRE 102 – 104 BROOM VALLEY ROAD ROTHERHAM S60 2QY	leased		Rotherham Borough Council Riverside House Main Street Rotherham S60 2AE	28 <sup>th</sup> June 2024

**Do you intend to provide services from all current premises?**

YES

**If yes, which premises will be classified as the contractual main site and which will be classified as the contractual branch(es) (if applicable):**

Main Site -Broom Lane Medical Centre  
70 Broom Lane  
Broom  
Rotherham  
S60 3EW

Branches – Kimberworth Park Medical Centre  
Broom Valley Medical Centre

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<p>If no, which of the current premises do you intend to practice from and detail the proposed timescales for withdrawing services from the other current premises:</p>	<p>NOT APPLICABLE</p>
<p>Do the proposed premises have the capacity and infrastructure to accommodate the additional patients and services?</p>	<p>YES no intention to close any site</p>
<p>Details of the distances between the practices and the transport links.</p>	<p>BROOM VALLEY TO BROOM LANE 0.6 MILES BY ROAD NUMBER 34 BUS          BROOM VALLEY TO KIMBERWORTH PARK 3.9 MILES NUMBER 34 BUS TO TOWN          AND CHANGE TO NUMBER 66</p>
<p>Details of car parking arrangements currently in place at all premises.</p>	<p>BROOM LANE – one car park          KIMBERWORTH PARK- 2 car parks          BROOM VALLEY - on street parking in front of practice</p>



### 3. Current Practice Area

Details of the current practice boundary (inner/outer if outer agreed) (please attach a map)	Practice A:	Practice B:
		Appendix 1

### 4. Current I.T. Information

Indicate which IT systems are currently in use at each practice

Practice A -	Practice B -
SYSTEM ONE	SYSTEM ONE

### 5. Patient Benefits and Engagement

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.

Patients should see little difference in the service provided. Primary care services will continue to be provided from all sites merging.

Services that BV patients will have access to that they didn't before.

Extended Hours  
Anti-Coag  
Aural Care

<p><b>Please provide details on the Patient and Stakeholder engagement undertaken by the practice</b></p>	
<p><b>Have the practice engaged with patients and/or stakeholders on the practice merger?</b></p>	
<p><b>If not, do the practices intend to engage with patients/stakeholders?</b></p>	<p>Yes. Patient consultation beginning November 18 and concluding January 19</p>
<p><b>When did/will you engage with patients/stakeholders?</b></p>	<p>Merge is planned for a years' time during the next three months a comprehensive patient engagement process will look to seek views and support from both practice populations. The Practices will be using outside support to aid this process but it is envisaged that Patient Participation Groups will be asked to suggest best ways to communicate to the</p>

	<p>populations and then through meetings, surveys and social media we will consult over a period of two to three months.</p> <p>At the start of this period we will have staff consultation where the plans will be explained.</p>
<p><b>In what form did you/will you engage with patients/stakeholders?</b></p>	<p>Hold PPG events – Advertised invited all pts            Display Posters – at BL, BV and KP            Notice on practice website            Patient survey – captured face to face – surveys given with FFT,            Notification via MJOG</p>
<p><b>With whom did/will you engage?</b></p>	<p>Patients that attend – Broom Lane, BV, KP            MJOG – targeting pts that hadn't attended for over 3 months            Staff members / colleagues – so all were up to date and could provide info to pts</p>
<p><b>If you have already carried out engagement, what was the outcome?</b></p>	



**6. Opening Times**

**Practice A: Current Opening Times (open = on-site & telephone access, between 8am and 6.30pm):**

	Morning		Afternoon		Evening	
	Open	Close	Open	Close	Open	Close
Monday	8.00			6.30	18.30	20.00
Tuesday	8.00			6.30	18.30	20.00
Wednesday	8.00			6.30	18.30	20.00
Thursday	8.00			6.30	18.30	20.00
Friday	8.00			6.30	18.30	20.00

**Practice B: Current Opening Times (open = on-site & telephone access, between 8am and 6.30pm):**

	Morning		Afternoon		Evening	
	Open	Close	Open	Close	Open	Close
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		

Please provide details of the extended hours (days and times) currently provided under the Extended Hours DES:

**Practice A:** MONDAY 7.15am - 8.00 AM one doctor 6.30 - 8.00 PM two doctors  
TUESDAY 7.15am -8.00 AM one doctor

**Practice B:**

NONE

**7. MERGED PRACTICE**

**Please provide details of the proposed practice:**

<b>Name of proposed merged practice</b>	BROOM LANE MEDICAL CENTRE
<b>Proposed practice code</b>	C87012
<b>Proposed date of merger</b>	05.04.2019
<b>Proposed contract type (GMS or PMS)</b>	PMS
<b>Proposed contract holder (individual or partnership &amp; name(s))</b>	Partnership – Dr's Cullen, Sanders, Kacker, Idukallu, Campbell, Langmead
<b>Proposed CQC registered manager</b>	Andrea kitchen
<b>Proposed Clinical Governance/complaints lead and system</b>	Dr J Sanders Dr R Cullen
<b>Please provide an explanation of any contractual variations that you consider are necessary to effect the proposed practice merger.</b>	Amendment to the BL PMS Contract – adding BV as a branch site from 31.03.19 Termination of the BV PMS Contract – from 01.04.2019
<b>Please provide any comments on any procurement and/or competition matters that may arise as part of the proposed contract merger.</b>	Both practices are in central Rotherham and patients have a good choice of various other practices who cover the same boundaries
<b>IT System merger – please provide details what needs to be undertaken</b>	Both practices are on the same clinical system, during the months before the merger both practices will be using the same clinical templates and coding so that at time of merger records will be



<p>to ensure the clinical systems are merged, including costs, timescales etc</p>	<p>transferred seamlessly from Broom Valley to Broom Lane.</p>
<p>Please indicate the proposed practice boundary for the proposed merged practice</p>	<p>Enquires made to the CCG IT Team to ensure the merger is booked</p> <p>See Appendix 1</p>
<p>Please confirm the neighbourhood and locality to which the proposed merged practice will belong</p>	<p>CENTRAL CENTRAL NORTH</p>
<p>Please provide any additional information that will support the proposed practice merger</p>	<p>Broom Valley and Broom Lane medical centres are located close to each other and are already working in collaborative way with Broom Lane providing minor surgery and warfarin monitoring to Broom Valley patients and the practice teams coming together for training events.</p> <p>The Practices are beginning to share more nursing staff and even without merger would begin to work alongside each other to provide the same levels of care for all their patients. As the single handed partner at Broom Valley has begun to approach retirement, they have considered the sustainability of their small practice and believe that to benefit the patients and to allow them to continue to provide with exemplary levels of primary care it would be better to merge with another practice.</p> <p>Broom Lane continues to develop as the NHS evolves and believes that the addition of Broom Valley patients that they will be able to more easily recruit and retain the various different levels of clinical staff required to continue to provide exemplary primary care</p> <p>It is the intention to fully utilise and expand the clinical space at Broom Valley, offering patients a wider choice of services.</p> <p>We plan to undertake a skills audit on all staff to ensure they are adequately trained to deliver high quality care to our patients.</p>

**Please provide comments from a financial perspective on the following matters if they are relevant to the proposed merger**

Premises	<p>Need to look at notional rent and cost of broom valley site          Notional rent BV - £13,100 July 2014</p> <p>Rent paid to RMBC - £11100 in June 2004 subject to rent review every 5 years – so next rent review due June 2019</p>
IT	<p>Estates assessments will be carried out to ensure the required upkeep of property is maintained. We will look to NHS England should future opportunities arise to bid for monies to improve our facilities. no additional IT will be needed however CCG IT support to move non clinical aspects of it records onto one area in the central server would be appreciated</p>
TUPE	<p>A stock take of IT equipment will be undertaken</p> <p>All staff currently employed will be transferred and continue employment at their same site</p>
Redundancy	<p>We will consult with staff and hold a Q&amp;A Document available for all.</p> <p>none planned</p>
QOF	<p>both high earning practices and this would continue</p>
Pension/Seniority	<p>seniority no longer applicable</p> <p>pensions would continued to be offered to all staff</p>
MPIG/PMS Premium	<p>no longer applicable</p>
Dispensing	<p>not applicable</p>



Describe the service delivery model for the proposed merged practice.

Please provide comments from a service delivery perspective on the following matters:

QoF	Both practices are high QoF achievers and have similar call and recall systems Year end QoF outcomes will be dependent on when systems merge. there will be no reduction in staff numbers or opening hours at any site
Access	Increased access
Primary Care Webtool	Merge Both practices under Broom Lane – completed as one surgery
Any recent ongoing breaches of contract	NONE
Recent or pending CQC issues	NONE Broom Lane – Good Broom Valley - Good
If one practice's service delivery is of a lower standard, is there a proposal to improve performance?	
Will there be a cessation of services post-merger?	no increased access to services at Broom Valley to increased skill mix
Will there be a reduction of hours for which services are provided post-merger?	no
Will there be a reduction in the number of locations or a change in the location of premises from which services are provided?	no Broom Lane already provides minor surgery/joint injections and warfarin monitoring for Broom Valley
Resilience – where the merged patient list is over 10,000, how will	with no reduction in clinical staff and no reduction in sites the comparative increase in practice number from 13103 to 14917 will allow Broom Valley patients to have an improved patient



**the practices ensure performance and patient experience is maintained and improved?**

experience with better access to different health professionals  
Upskilling staff

**Services to be provided by the proposed merged practice**

**Directed Enhanced Services:**

- Vaccinations and Immunisations
- Learning Difficulties
- Seasonal Flu

**CCG Commissioned Services :**

- Aural Care
- Anticoagulation
- Minor Surgery – Excisions
- Minor Surgery – steroid Injections
- Phlebotomy
- PSA Testing
- Ring pessary
- Shared Care – Denosumab
- Shared Care – Dmards
- Shared Care – Ibandronic
- Shared Care – Testosterone
- Transgender
- Suture Removal
- Case Management
- Care Homes
- Physio First
- Extended Hours Hub

**Local Authority Commissioned Services :**

Intermediate Bed Care – Lord Hardy Court  
 Sexual Health  
 Shared Care – Methadone/Subutex

Please provide details of any proposed changes to the future delivery of extended hours, the rationale behind any changes and details of any patient consultation that may have taken place regarding the changes:

**Merged practice:**  
 Additional Extended hours if required

**Proposed Merged Practice Opening Times:**

	Morning		Afternoon	
	Open	Close	Open	Close
<b>Monday</b>	8.00			18.30
<b>Tuesday</b>	8.00			18.30
<b>Wednesday</b>	8.00			18.30
<b>Thursday</b>	8.00			18.30
<b>Friday</b>	8.00			18.30

## 8. 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 practices and third parties, such as commissioners, the order in which the actions need to be undertaken and timescales for actions to be completed. A template mobilisation plan can be used but will need to be amended to fit the proposed practice merger.

1. FINANCE - Accountants to review last three years of accounts, patient consultation costs, costs to buy out retiring partner, refurbishment of premises,
2. STAFFING
  - a. doctors- one doctor to take one session to help align practice clinical work (non clinical session) recruit two new GPs.
  - b. nurses and HCA- does HCA/nursing team have capacity to provide same level of service at all three sites
  - c. administrative staff- align staff training (already having mandatory training together) appoint third site supervisor, look to increase senior management team.
3. PREMISES - Refurbishment costs, transfer of rental agreement, CQC registration, IT requirements
4. PATIENTS - Consultation, continuity of care, template, protocols and monitoring

### Next Three Months -

- review accounts,
- partners agree to model being proposed,
- begin patient and staff consultations,
- appoint GP to take one session to align clinical protocols and procedures,
- initial discussion with it about process to merge it systems



**9. Contractual issues**

<b>To be completed by CCG and NHS England</b>	
<b>Details of any remedial breach notices issued within the last three years</b>	
<b>Current CQC rating (across each domain and overall)</b>	
<b>Registered list size for last three years</b>	

To be signed by all current partners / individuals to the contracts being proposed for merger

We, the undersigned, confirm that the information provided in this outline business case is completed and accurate. We understand the requirement for us to undertake our own due diligence checks on the proposed merger and to seek our own legal and financial advice. We also understand the importance of establishing our own formal partnership deed to support, where the proposed merged contract is to be held in partnership.

Signed: .....

Print: .....

Date: .....

Signed: .....

Print: .....

Date: .....

Signed: .....

Print: .....

Date: .....

Signed: .....

Print: .....

10/11/18

Date: ..... 28.11.18

Signed: .....



Print: .....

V Campbell

Date: .....

Signed: .....



Print: .....

DR SIMON CAMPBELL

Date: .....

28/11/18

Please continue on a separate sheet if necessary

Signed: .....



Print

SARA WALKER

Date

28.11.18