

## TRIGGER TEMPLATE

<b>NHS Trust or body &amp; lead officer contacts:</b>	<b>Commissioners e.g. CCG, NHS England, or partnership. Please name all that are relevant , explain the respective responsibilities and provide officer contacts:</b>
<p>Current GP practices:</p> <ol style="list-style-type: none"> <li>1. Nexus Health Group</li> <li>2. Surrey Docks Health Centre,</li> </ol> <p>Lead contacts:</p> <p>Dr Patrick Holden, GP Partner, Surrey Docks Health Centre <a href="mailto:Patrick.holden@nhs.net">Patrick.holden@nhs.net</a></p> <p>Dr Amr Zeineldine, Executive Chair, Nexus Health Group <a href="mailto:Amr.zeineldine@nhs.net">Amr.zeineldine@nhs.net</a></p>	<p><b>NHS England (London).</b> Jill Webb, Head of Primary Care. Email: <a href="mailto:jill.webb3@nhs.net">jill.webb3@nhs.net</a></p> <p><b>NHS Southwark Clinical Commissioning Group (CCG).</b> Andrew Bland. Chief Officer. Email: <a href="mailto:andrewbland@nhs.net">andrewbland@nhs.net</a></p> <p>NHS England and NHS Southwark CCG entered joint commissioning arrangements for primary care on 1 April 2015 and have a joint responsibility for decision making relating to the commissioning of general practice services. The statutory responsibility remains with NHS England, the contract holder for the current and future (proposed) contracts.</p> <p>From 1 April 2017, the CCG will have delegated responsibility from NHS England for decision making relating to the commissioning of general practice services.</p>

Trigger	Please comment as applicable
<b>1 Reasons for the change &amp; scale of change</b>	
What change is being proposed?	<p>The partners of Nexus Health Group and Dr Holden and Marrinan based at Surrey Docks Health Centre (SHDC) are proposing to merge into one partnership from 1 July 2017. The merger will result in Dr Holden and Dr Marrinan becoming partners of Nexus Health Group. This follows a review of the benefits of such a merger and an assessment of the strategic fit with NHS system transformation.</p> <p>The merger will result in a combined list size of approximately 68,000 patients. The partnership will hold one PMS contract for the delivery of primary care services across all existing sites.</p>
Why is this being proposed?	Both organisations are approaching the merger for different reasons. Nexus Health Group is committed to the delivery of general practice at scale to support quality improvement and sustainability of general practice and was formed in August 2016, following the merger of 4 individual partnerships in Southwark. Services are currently delivered to over 58,000 patients across seven sites.

	<p>The original business case, for the merger of the 4 partnerships, outlined how Nexus Health Group, once formed, would look for opportunities of growth to further support of primary care transformation and the sustainability of general practice for north Southwark. The merger with SDHC supports this ambition.</p> <p>In recent years SDHC has reduced from 5 to 2 partners, because of relocation of partners outside London or to other medical areas. The current salaried doctors do not wish to take on partnership roles or the running of the practice. This has led to the current partners of SDHC, Dr Holden and Dr Marrinan wanting to merge with Nexus Health Group to support the sustainability of general practice for the patients of SDHC.</p> <p>The merger of both partnerships supports the delivery of primary care at scale centred around geographically aligned populations. Both practices deliver primary care services in the same well-defined geographical area within north Southwark (Bermondsey &amp; Rotherhithe and Borough &amp; Walworth localities).</p>
<p>What stage is the proposal at and what is the planned timescale for the change(s)?</p>	<p>Both practices have completed business due diligence and are in the process of drafting a business case for approval by NHS England and the CCG. It is proposed that the business case will be considered by the Primary Care Joint Committee on 30 March 2017.</p> <p>It is proposed that the merger will take place from 1 July 2017.</p>
<p>What is the scale of the change? Please provide a simple budget indicating the size of the investment in the service and any anticipated changes to the amount being spent.</p>	<p>The approximate combined value for the two existing partnerships is £8.25 million.</p> <p>The merged patient list will be contracted under a PMS contract. As the SDHC partnership currently holds a GMS contract the price per patient will increase to be in line with the PMS contract value. This is approximately a total of £200,000 per year.</p> <p>This is in line with the CCG's commissioning intention to offer all practices in Southwark the ability to earn the PMS contract premium funding.</p>
<p>How you planning to consult on this? (please briefly describe what stakeholders you will be engaging with and how) . If you have already carried out consultation please specify what you have done.</p>	<p>The 4 individual partnerships which formed Nexus Health Group in August 2016 completed significant patient and stakeholder engagement and consultation.</p> <p>The business case also outlined how Nexus Health Group would look for opportunities of growth to further support the delivery of primary care transformation and the sustainability of general practice for north Southwark. The merger with SDHC supports this ambition. Nexus Health Group will engage and consult with their patient participation groups around the merger with Surrey Docks Health Centre to seek patients views.</p> <p>Both partnerships will develop a more focused patient</p>

	<p>engagement plan for the patients of Surrey Docks Health Centre which will be in place before, during and after the merger. The patient engagement plan will include:</p> <ul style="list-style-type: none"> <li>- Consulting and discussing the merger with the Chair of the PPG to plan the engagement process and to develop a focus group to design the key messages for patients.</li> <li>- Using a variety of methods to consult with patients such as posters, web sites, flyers, texts, messages on prescriptions, emails, open meetings and surveys.</li> <li>- Proactively seeking views of patients who may traditionally be underrepresented by PPG (e.g. parents, those with serious mental health problems, housebound, young adults, patients whose first language is not English and the elderly).</li> <li>- Consulting and attending local community forums (eg Canada Water forum, Community council, Time and Talents, dockland settlement).</li> </ul> <p>The SDHC Partners have consulted patients regarding a previous merger which did not progress and feedback from patients was positive with the understanding that a merger will support the sustainability of the practice.</p> <p>The partnerships will also consult with local stakeholders including:</p> <ol style="list-style-type: none"> <li>i. Local voluntary and other citizen forums</li> <li>ii. Southwark Health Watch</li> <li>iii. Local ward councillors</li> <li>iv. Local acute and community care providers (KCH and GSTT) and SLAM</li> <li>v. Out of hours services and 111</li> <li>vi. LMCs in both Southwark &amp; Lambeth</li> <li>vii. Local GP practices and GP federations</li> <li>viii. Local faith and community group</li> <li>ix. Local Medical Committees in both Southwark and Lambeth</li> <li>x. Local MPs</li> </ol>
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<b>2 Are changes proposed to the accessibility to services?</b>	<b>Briefly describe:</b>
Changes in opening times for a service	There will be no reduction in current opening times.
Withdrawal of in-patient, out-patient, day patient or diagnostic facilities for one or more speciality from the same location	None
Relocating an existing service	No service will have to relocate as a result of the merger.

Changing methods of accessing a service such as the appointment system etc.	Initially there are no proposals to change the way patients access the practices. Nexus are reviewing and designing a consistent access model for all patients across the organisation. The merged partnership will work towards the delivery of the London Strategic Commissioning Framework to deliver accessible primary care services by providing one-click/one-contact access for same day telephone triage, utilising integrated IT and telephony as outlined in their business case.
Impact on health inequalities across all the nine protected characteristics - reduced or improved access to all sections of the community e.g. older people; people with learning difficulties/physical and sensory disabilities/mental health needs; black and ethnic minority communities; lone parents. Has an Equality Impact Statement been done?	Current access to these groups will be maintained as there will be no reduction of current services offered.
<b>3 What patients will be affected? (please provide numerical data) Briefly describe:</b>	
Changes that affect a local or the whole population, or a particular area in the borough.	<p>The registered patients of:</p> <ul style="list-style-type: none"> <li>• Surrey Docks Health Centre, Blondin Way, SE16 6AE</li> <li>• Nexus Health Group: <ul style="list-style-type: none"> <li>• Aylesbury Medical Centre, SE17 2XE</li> <li>• Dun Cow Surgery, SE1 5LU</li> <li>• Commercial Way Surgery, SE15 6DB</li> <li>• Decima Street Surgery, SE1 4QX</li> <li>• Artesian Health Centre, SE1 3GF</li> <li>• Princess Street Group Practice, SE1 6JP</li> <li>• Manor Place Surgery, SE17 3BD</li> </ul> </li> </ul> <p>Both partnerships deliver general practice services in the same well-defined geographical area within north Southwark (Bermondsey &amp; Rotherhithe and Borough &amp; Walworth localities).</p>
Changes that affect a group of patients accessing a specialised service	None
Changes that affect particular communities or groups	None
<b>4 Are changes proposed to the methods of service delivery? Briefly describe:</b>	
Moving a service into a community setting rather than being hospital based or vice versa	N/A

Delivering care using new technology	The practice's business case includes an ambition to implement new methods of consulting, including but not limited to e-mail and video consultations (e.g. Skype) and increased use of telephone.
Reorganising services at a strategic level	The merger of both partnerships will support the delivery of Southwark's Primary and Community Care Strategy and Five Year Forward View by: <ul style="list-style-type: none"> <li>- Improving quality of primary care services and reducing variation across practices</li> <li>- Delivering services to a geographical aligned populations</li> <li>- Supporting the delivery of new models of care</li> </ul>
Is this subject to a procurement exercise that could lead to commissioning outside of the NHS?	No.
<b>5 What impact is foreseeable on the wider community? Briefly describe:</b>	
Impact on other services (e.g. children's / adult social care)	No impact – the merger will support the development of new models of care. The large registered list will support Nexus to be well placed for working towards integrated care with other acute, community and social care providers.
What is the potential impact on the financial sustainability of other providers and the wider health and social care system?	None – the proposal supports the sustainability of general practice in Southwark.
<b>6 What are the planned timetables &amp; timescales and how far has the proposal progressed ? Briefly describe:</b>	
What is the planned timetable for the decision making	The practice's business case will be reviewed and considered for approval in public by the Primary Care Joint Committee on 30 March 2017.
What stage is the proposal at?	The practices have completed internal due diligence and are developing a business case for approval by the Primary Care Joint Committee.
What is the planned timescale for the change(s)	4 months – It is proposed the merger will take place from 1 July 2017.
<b>7 Substantial variation/development Briefly explain</b>	
Do you consider the change a substantial variation / development?	No
Have you contacted any other local authority OSCs about this proposal?	No