

Briefing note

To: Health and Social Care Scrutiny Board (5) **Date:** 24^{u1} July 2013

Subject: Briefing on a proposed contract merger (Dr Jagadeshwari and Dr Ezzat and Partners)

1 Purpose of the Note

The Area Team has received a formal request from Dr Jagadeshwari and Dr Ezzat for a contractual merger, which was approved in principle at the Primary Care Committee. The Board are asked to support this decision so the merger process can commence

2 Recommendations

For the Board to note the contents of this briefing and to support the decision of the Primary Care Committee to approve the proposed merger

3 Information/Background

- 3.1 Dr Jagadeshwari practices from Maidavale surgery in Styvechale Coventry (M86043). She holds a single handed GMS contract and the practice list is approximately 2300 patients. Dr Ezzat is a senior partner in Phoenix Family Care (M86007) based in Park Road, Coventry with two other current partners and a practice list of approximately 5800.
- 3.2 The contract holders are proposing a full contractual merger at earliest opportunity. Both sets of contract holders are keen to merge the contracts as soon as possible to enable robust succession planning for both practices Dr Jagadeshwari is looking to retire from practice soon and the merger will enable continuity of care to be maintained for her list.
- 3.3 There are some issues with the quality of Maidavale practice premises. The medium term view, should the merger go ahead, is to designate those as a branch premises and close them down so that all services are provided from the Phoenix site. The practice has undergone some refurbishment and further improvements are planned shortly to accommodate the list. The Area Team feel assured this will have minimal impact on patient care.
- 3.4 Following a joint meeting with both practices, the contracting team feels reassured about the process the practices will follow to ensure all the regulatory requirements around consultation with staff and patients will be followed.

 Considerable consideration has been given by both sets of contract holders to the practical aspect of the merger including service provision, staff consultation etc.
- 3.5 We have requested the relevant regulatory information and a service plan to enable us to commence the contract merger process and the practices have submitted both. Significant consideration has been given to access to services, clinical capacity in house and the range of services provided and the area team feels the merger will be beneficial to patients from both practices. The practice boundary will not be affected by the merger.

3.6 Once supported by the Scrutiny Committee, formal merger process will commence.

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