### **Annex B Template mobilisation plan for practice merger**

| **Area** | **Action required** | **Due date** | **Who** | **Comments/issues** | **Key contacts** | **Status** |
| --- | --- | --- | --- | --- | --- | --- |
| **1. Patients** |
| 1.1 Communication | Draft letter for patients |  | Practice | Letters to include details of:* Neighbouring practices,
* PALS / Health Watch
* FAQs such as
	+ Next steps,
	+ Contact details of new practice
	+ Background new practice - Introduction
	+ Prescriptions
	+ Referrals
 |  |  |
| Distribution of letter to patients |  | Practice | Practice to arrange distribution |  |  |
| Telephone message to be put onto practice telephone.  |  | Practice |  |  |  |
| Notice on doors & local pharmacy |  | Practice |  |  |  |
| Consider welcome message / patient group work |  | Practice | Practice to consider:* Patient group invite
* Welcome Leaflet
* Poster
 |  |  |
| 1.2 Records  | Medical records |  | Practice |  |  |  |
| 1.3 Clinical Overview | Share Plan with Medical Director |  | Commissioner |  |  |  |
|  |
| 2.1 Communication | Inform staff of current situation and options.  |  | Practice |  |  |  |
|  |
| * 1. Lease
 | Ensure premises lease are in place |  | Practice |  |  |  |
|  |
| * 1. IT Plan
 | * IT Plan
 |  | Practice |  |  |  |
| 4.2 BSU Transfer of Patients | * BSU/ LASCA – merger of registered patients
 |  | Practice | Practice need to confirm pooled list or GP ListAny changes in GP performers need to be notified to PCSE using PCSE online by those performersUpdate practice informationAgreed dates |  |  |
|  |
| 5.1 OTMG / RRMG | Letter to Practice 3to confirm approval for merger |  | ??? |   |  |  |
| 5.2 Practices | Letter/email to neighbouring practices to inform of merger confirmation |  | Practice |  |  |  |
| 5.3 Overview and Scrutiny | Liaise with overview and scrutiny to confirm merger date.  |  | Practice |  |  |  |
| 5.4 LMC | Communication with LMC to confirm merger date.  |  | Practice |  |  |  |
| 5.5 PCT comms team  | Email to comms to inform them of potential media interest  |  | Practice /Commissioner |  |  |  |
| 5.6 FT/ s Provider arm | District Nurses/Health Visitors to be notified to liaise with patients on caseload. |  | Practice |  |  |  |
| Palliative care manager to be informed to liaise with nurses.  |  | Practice |  |  |  |
| Common Mental Illness – all mental health workers to be notified and liaise with patients.  |  | Practice |  |  |  |
| Severe and Enduring Mental Health  |  | Practice |  |  |  |
| Mental Health Trust  |  | Practice |  |  |  |
| Midwifery |  | Practice |  |  |  |
| Business Managers at FT’s to be informed  |  | Practice /Commissioner | Patients Discharged from HospitalLocal Hospitals and TrustMental health trustAmbulance Service |  |  |
| 5.7 PALS | Inform PALS and complaints of merger |  | Practice | Inform of contact details for practice  |  |  |
| 5.8 BSU | Need to update lists/practice information |  | Commissioner |  |  |  |
| Inform courier services |  | Practice |  |  |  |
| 5.9 CCG | Need Email to ICB to cascade to Directors. |  | Practice |  |  |  |
| 5.10 OOH | Need to notify OOH - NHS111 |  | Practice |  |  |  |
| 5.11 Regional Team | Notify directors of the NHS ICB team |  | Commissioner |  |  |  |
| 5.12 Notify other agencies  | Local Pharmacies |  | Practice |  |  |  |
| Local Hospitals |
| Business Services agency (BSA)  |
| SHA |
| PCSE | Check performers aligned to new practice with appropriate online submissions to PCSE |  |  |
|  |
| 6.1 Contract | Need to prepare contract schedule to reflect contract termination / merger contract value  |  | Finance | Finance to prepare and agree sign off with practiceCapitation list size 31st March |  |  |
|  |  |  |  |  |  |  |
| 6.2 Exeter / QMAS | Administer closure of contract on Exeter system/QMAS |  | Commissioner |  |  |  |
|  |  |  |  |  |  |
| Practice to print off copy of population manager  |  | Practice |  |  |  |
| 6.3 Bank Accounts | Payments and recoveries |  | Practice | To confirm:* New / same bank accounts
* If new bank account confirm term for old account staying open for payments and recoveries
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|  |
| 7.1 Contractual | Contract Variation to add all Partners to contract |  | Commissioner | Date to be confirmed |  |  |
| Confirm Practice agreement in place |  | Practice / Commissioner |  |  |  |
| Termination notice  |  | Commissioner |  |  |  |
| Confirmation of provider name |  | Practice | To confirm if name is staying the same or changing  |  |  |
| 7.2 BSU | BSU/LASCA to add end date to the Exeter contract and transfer patients  |  | Commissioner | BSU to update contract details and transfer patients |  |  |
| Check performers aligned to new practice and appropriate PCSE online submitted  |  | Commissioner |  |  |  |
| 1. ACTIONS FROM PATIENT ENGAGEMENT
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| 8.1 Appointments | Capacity of appointments |  | Practice | * Two new GPs appointed at Practice 1;
* Following merger existing clinics to be reviewed to consider better allocation across the two sites;
* Following merger cross site working to be implemented for clinicians, and;
* Following merger structural changes to be made at Practice 2 site to accommodate more clinical sessions to increase appointment availability.
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| Continuity of GP |  | Practice | * The practices have discussed with patients that they will still be able to see their doctor although it may be at either Practice 1 or Practice 2. The practice will monitor continuity of care throughout the merger.
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| 8.2 Adequate facilities  | Telephone System |  | Practice | * The practice has informed patients that there will be one improved telephone system which will be based at Practice 1 with multiple lines to improve access to the practice.
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| Capacity of waiting room  |  | Practice | * Following merger existing clinics to be reviewed to consider better allocation across the two sites;
* Following merger cross site working to be implemented for clinicians,
 |  |  |
| 8.3 Staffing | Concerns for staff |  | Practice | * The practice have informed patients that the merger will be a significant change for all, we plan to work will all of the staff to ensure a smooth positive change with benefits for our staff and patients.
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