Church View Medical Practice and Colliery Medical Group
Patient Question and Answer Sheet

We know you may have a number of questions about what is happening to your GP surgeries. Below are some of the more frequently asked questions and answers we have had from patients about this merger. If you have any other questions you would like to make, please let us know by sending an email to: sun.sccg@nhs.net.

Why do you need to make changes?
The current providers at Church View Medical Centre and Colliery Medical Group have contacted the commissioner of NHS health services in Sunderland, NHS Sunderland Clinical Commissioning Group (CCG), to say that they no longer wish to provide GP services after 30 September 2017. This means that the CCG will need to seek a new provider for the services.

Why was the decision made to merge the two practices?
As the two practices are in a similar situation and are located next door to each other, the CCG decided to combine the two registered patient lists and have one provider deliver GP services for all patients at both practices.

Will I need to find a new GP or do I have to re-register?
You do not need to take any action, and can carry on using the current service in the normal way. Your registration will be automatically transferred when the new arrangement starts on 1st October 2017, and you will still be able to use the same range of GP services.
What if I don’t like/have previously chosen to leave the practice?
As a patient you have the right to choose another practice – details are available at www.nhs.uk.

How many patients will be at the practice?
Currently, Colliery Medical Group have about 5,100 patients registered at their practice and Church View Medical Group have 5,900. This means that there will be 11,000 patients.

Where will it be based – the same building?
From 1st October 2017, Church View Medical Centre building will physically close. The new provider will deliver services in the building that Colliery Medical Group currently operates out of, Silksworth Health Centre. A lot of work will take place to ensure that Silksworth Health Centre is large enough to accommodate the increased list size. This includes approximately ten clinical rooms downstairs, with new space used upstairs for admin staff. All clinical rooms will be downstairs.

How many medical staff will there be?
There is money in the budget for between four and five GPs. However, it will be down to the new provider to determine the appropriate skill mix of clinical staff for its registered population. Therefore, some of this budget may be used for GPs, Nurse Practitioners, Practice Nurses, Pharmacists and Health Care Assistants.

Will the new provider use permanent GPs or Locum GPs
It will be down to the new provider to make sure there are enough GPs to meet the needs of patients. While we would like this to be through permanent GPs, the new provider may need to rely on Locum GPs, particularly at the beginning. All practices are struggling to recruit GPs and therefore have to rely on Locum GPs. There is a shortage of GPs in medical schools, and in particular a shortage of GPs in Sunderland. New GPs are taking up posts as Locum GPs as they don’t have the responsibility of running a practice.
What are you doing to attract more GPs to Sunderland
We are looking at ways to try to get and keep GPs in Sunderland. We have recruited 15 new GPs through a Career Start programme, with another six GPs being recruited soon. These GPs are qualified, and are considering a career in primary care. The scheme aims to give them work experience over a two-year period within a GP surgery so they can build-up their skill-set. We hope at the end of the two-year scheme, they will decide to stay. This is not a quick fix solution, but hopefully a long-term solution. We are also talking with Sunderland University who are looking to set up a medical school. This will hopefully train GPs who decide to stay in the Sunderland area. In addition, we are working closely with GPs to reduce the paperwork and bureaucracy involved, to make it easier for them to see patients, and to make it more attractive to be a GP in the Sunderland area.

Can you stop or cap the fees paid to locums?
Unfortunately, we cannot. If we put a cap on the locum costs but they will just move to Newcastle, South Tyneside and Durham, making the recruitment of GPs to Sunderland even harder. The cost of Locum GPs is a national issue, and one which is largely out of our control.

Will it be harder to get an appointment because of the increased patient list?
By combining the patient list, it is more likely providers will be able to recruit permanent GPs. Therefore we would not expect it be any harder to get an appointment. However, access to appointments will be closely monitored.

Will I still be able to see the same doctor? What will happen to the staff?
All staff employed by the practice will have the opportunity to transfer to the new provider. While we hope all current staff and GPs do want to stay with the new provider, this will be down to them to decide as individuals.
How will a new provider be appointed?
For new providers, the NHS needs to go through a legal procurement process to invite different providers to apply to deliver the new contract. This process closes on 8 June 2017 for providers to submit their applications for providing services for Church View Medical Group and Colliery Medical Practice.

After this, the application forms of any provider who applies is then subject to a rigorous assessment process by an evaluation panel, including commissioners, clinicians, finance, patient, HR and IT experts. The potential providers will be asked a range of questions about how they will be able to meet the contract requirements. The outcome of the evaluation will then go to the CCG Primary Care Committee (the decision making body for the CCG) on 6 July to be officially signed off.

The new provider will then be able to start getting ready to provide the new contract on 1 October 2017.

What happens next and when will I find out who the new provider will be?
We will take the comments, questions, and information we receive from patients, and share this with the successful applicant in order for them to address any concerns patients have when they commence the service. We will be writing out to patients in mid-July to let them know. The new provider will officially start on 1 October 2017.