

Arthur Medical Centre
Main Street, Horsley Woodhouse, Derby, DE7 6AX
Tel: 01332 880249
www.arthurmedicalcentre.co.uk

'Delivering excellent holistic, patient-centred care through teamwork delivered by valued members of our practice team'

GP Partner

Application Information Pack

The next few pages contain some information about the Practice which may prove useful and of interest.

Further information can be found by visiting the Practice web site at <http://www.arthurmedicalcentre.co.uk>





GP Partner 4-6 Sessions

Our partnership is seeking to recruit a partner to join our friendly, flexible, family orientated team which embraces the challenges of our times. We would like a motivated new partner who values good patient care whilst achieving a healthy work life balance.

Practice Locality

The Practice is semi-rural located in the centre of the practice area, which extends about two and a half miles in all directions (see map on next page). Arthur Medical Centre is situated on a cross roads which divides two large villages, resulting in most of the population being close to the Practice. A few smaller scattered villages are covered as well as the edges of three former industrial market towns, part of the borough of Amber Valley.

The current list size is around 8,600. The age-sex distribution in the practice population is broadly similar to national statistics with a slight excess of frail, elderly patients.

The Practice serves a heterogeneous population. Some of the population are retired ex-miners, others work for small local industry, in farming or commute to nearby cities. Denby Pottery is the largest local industry and located on the outskirts of the practice area. There are areas of affluence in the smaller villages. There are young working families in privately owned homes. There are areas of deprivation, especially in one of the villages where there is a series of small estates. Drug misuse is a minor issue. The area suffers from isolation especially for those without their own transport. Apart from a few shops and post offices, there are few facilities locally.

The Practice is the principle provider of medical care for patients in two local residential homes and one nursing home.

A new building development of up to 1500 homes has been proposed for land north of Denby. This development would lie within the current practice boundary. However this plan has not yet been approved/adopted by Amber Valley Borough Council. In anticipation of this building development, the Practice has developed plans to extend the building. With the support of the CCG, a bid was placed with NHS England for an improvement grant. Phase One of this bid, which primarily involves extension of the car park and improvements to the entrance of the site, received formal approval from NHS England in October 2016 and was completed 2 years ago.

Teaching

All staff of the Practice have been involved in the teaching of GP Registrars for many years. The Practice and three Educational/Clinical Supervisors are accredited by the East Midlands Deanery for the training of GP Specialty Registrars. Places are available for up to four registrars at any one time.

The whole practice is involved in the teaching of medical students from Nottingham Medical School.

The Practice Nurse team are involved in the teaching of student nurses from Nottingham University.

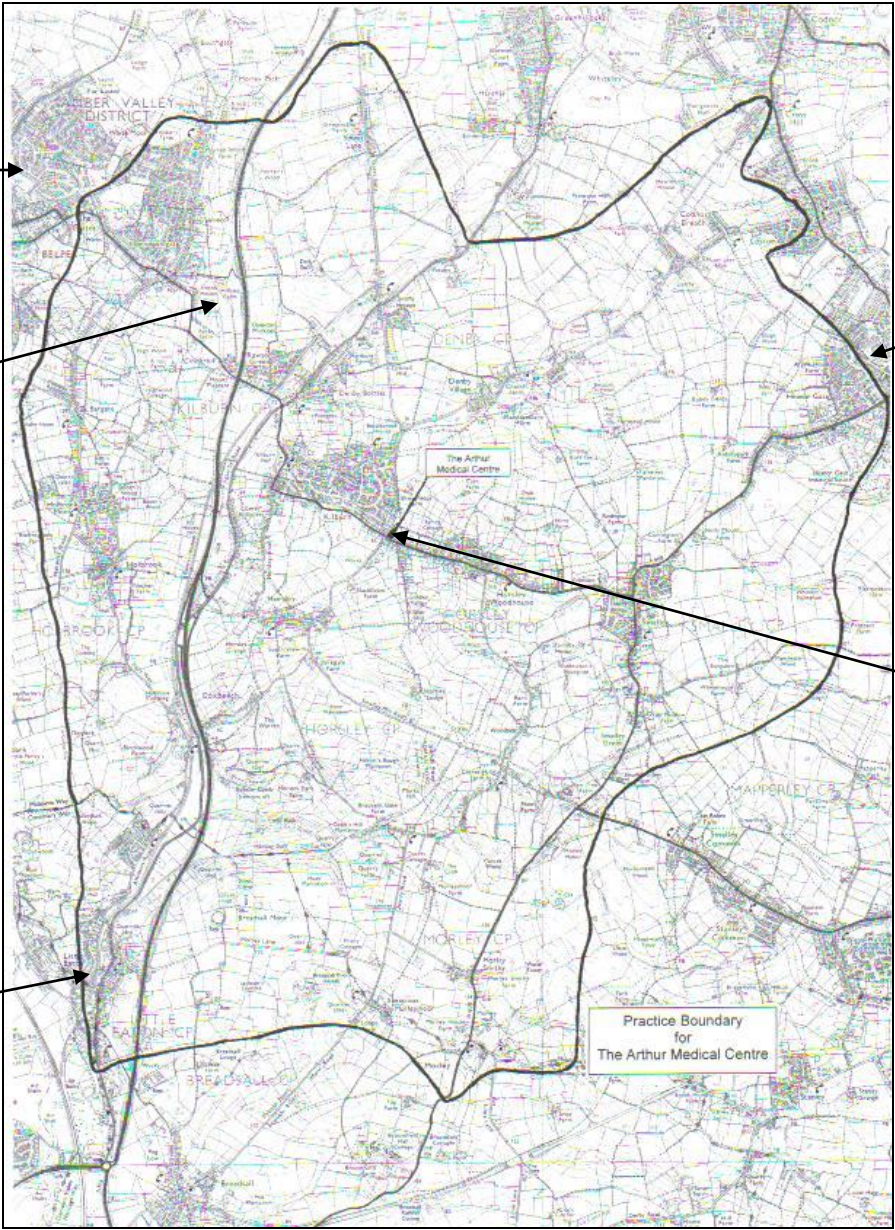
Belper

Proposed
Building
Development

Little
Eaton

Heanor

Arthur Medical
Centre



Practice Services

- Usual General Medical Services
- Nurse led chronic disease management clinics for respiratory and cardiovascular diseases, diabetes, anticoagulation
- Nurse Practitioner clinics for acute illness
- Advanced Clinical Practitioner specialising in care of patients over 65 years of age and those who are frail
- Clinical Pharmacist clinics for medication reviews, chronic disease management and frailty support
- Pharmacy Technician for medication updates and quality projects
- Care Coordinator organising urgent support and care for complex patients in the community
- Midwife in-house clinic
- Attached District Nursing Team
- Phlebotomy in-house clinic
- Health Visitor and School Nurses available for support
- Contraception services including IUCD fitting and implants
- Minor injuries services
- Minor operations and injections
- Specialist diabetes integrated care clinics
- Child health surveillance clinics
- Monthly in-house consultant psychiatric, orthopaedic and general surgery clinics
- Regular Citizens Advice Bureau

GP Commissioning and Primary Care Network

The Practice participates actively within the Derbyshire Clinical Commissioning Group, and has had a key role in the development of several services within the CCG. The Practice is part of the Amber Valley Locality. A GP representative from the Practice attends regular sub-locality meetings (comprising of the five practices from Duffield, Belper and West Hallam, in addition to Horsley Woodhouse, locally called 'The Belper 5'). With additional funding from the CCG, 'The Belper 5' has successfully piloted the development of an enhanced community nursing service and the recruitment of clinical pharmacists in addition to developing effective collaborative working between the five practices. The Practice is currently actively involved in forming a Primary Care Network, which is likely to be based around the framework of the 'Belper 5' sub-locality. The Practice is represented on the Shared Care Pathology and the Information Management and Technology working groups. Some partners are involved with out of hours provision allowing a valuable link to the provider.

Alexin Healthcare

Arthur Medical Centre is a shareholder in Alexin Healthcare, a limited company owned by the vast majority of practices in Derbyshire and Staffordshire. The aims of Alexin Healthcare are to retain enhanced services for primary care; to be attractive to commissioners; to provide consistently excellent services that meet patient needs; to provide innovative and cost effective solutions for commissioned projects; and to return as much activity and funding to general practices as possible.

Care Quality Commission

The Practice has a positive approach towards CQC. The management partner is the registered manager for CQC. However, each partner has several areas of responsibility which they oversee (with the aid of the relevant support team) to ensure the Practice is CQC compliant. The Practice was last inspected by CQC on 3rd January 2019. Their report is very positive, with the practice being rated as good in all services. The full report can be viewed on the CQC website (<https://www.cqc.org.uk/location/1-575410189>).

The GP Partners (number of sessions worked in brackets)

Dr Andrew McKenzie (5)	BMedSci, BM, BS, (Nottingham 1989), DRCOG, FRCGP, Cert. Family Planning. Derby Vocational Training Scheme 1990-1993 and joined the Practice in 1993. Approved GP trainer 2004.
Areas of responsibility:	Management partner; staff and practice development; complaints; CQC responsible partner.
Interests:	Health coaching; medicine for the elderly; male health; prescribing; motivational interviewing.
Dr Laura Wilton (4)	BMedSci, BM, BS, (Nottingham 2003) MRCGP, DCH, DFFP. Derby Vocational Training Scheme 2004-2007 and joined the Practice in April 2008. Approved Clinical Supervisor 2013.
Areas of responsibility:	Practice nurses and Advanced Clinical Practitioner; clinical supervision; liaison with the Community Nursing team.
Interests:	Contraception (including coils and implants); women's health; paediatrics.
Dr Marie-Lou Tidmarsh (6)	BMedSci, BM, BS, (Nottingham 1998), MRCGP, DFFP, PGDipMedEd Burton-on-Trent Vocational Training Scheme 2000-2003 and joined the Practice in 2011. Approved GP trainer 2013.
Areas of responsibility:	GP training; information technology; Caldicott Guardian; learning difficulties; patient information; care homes; Patient Participation Group.
Interests:	Health promotion; contraception (including coils and implants); women's health.
Dr Kate Woodier (6)	BMedSci, BM, BS, (Nottingham 2007) MRCGP, DRCOG. Derby Vocational Training Scheme 2009-2012 and joined the Practice in 2014.
Areas of responsibility:	Clinical governance including audits and significant events; GP rotas; medical student teaching; health and safety; commissioning and place development as part of the 'Belper 5' group of practices, medical student teaching; MDT with care coordinator.
Interests:	Palliative care; women's health; elderly medicine.
Dr Jenny Clark (6)	BSc, BM, BS, (Nottingham 2011), MRCGP. Derby Vocational Training Scheme 20013-2016 and joined the Practice in 2017. Approved Clinical Supervisor 2019.
Areas of responsibility:	Diabetes lead; palliative care; reception team; clinical governance; joint injections and minor operations.
Interests:	Diabetes; palliative care; training; women's health.
Dr Kathryn Pontin (4)	MB BChir (Cambridge 2006) MA, MRCP, MRCGP. West Cambs Vocational Training 2008-2011 and joined the Practice in April 2015.
Areas of responsibility:	Safeguarding; joint injections; medical student teaching; prescribing lead.
Interests:	Clinical communication skills; general medicine; rheumatology.

Since returning to work from maternity leave following the birth of her twins, Kathryn Pontin has decided to focus her energy on motherhood, making the difficult decision to leave the partnership.

Employed Staff

- Practice Business Manager
- Assistant Practice Manager – Finance and HR
- Assistant Practice Manager – IT and Admin
- Salaried GP
- Business Support Manager
- Pharmacy Technician
- Nursing Team – 5 Practice Nurses and 2 Health Care Assistants
- Administration Team (5)
- Repeats Clerks (2)
- Reception Team (7)

Numbers given are numbers of staff not FTEs as most are part-time workers.

Attached Staff (CCG, DCHS, RDH)

- Advanced Clinical Practitioner
- Clinical Pharmacist
- Care Coordinator
- District Nursing Team
- Health Visitor
- School Nurse
- Community Midwife
- Phlebotomist

Team working at Arthur Medical Centre

Ethos

We foster a strong theme of team working, and there are excellent relationships with and within our staff. The working environment is friendly. As a partnership we are supportive, and sensitive to each others' needs. We work hard to achieve excellent patient care by embracing evidence-based practice and innovation. All the doctors commit much time, thought and energy to the betterment of the Practice, in addition to their clinical sessions. The partners are highly motivated individuals and greatly committed to the Practice. As such we would want to develop a new partner working with the GP Taskforce's 'GP Partner Development Programme' as we believe passionately in the partnership model of general practice.

Working week

Morning surgery starts flexibly depending on the needs of the doctor but mostly at 8:20am, followed by visits, and evening surgery at 3.00pm. Minor surgery sessions and child health surveillance clinics are wrapped into the evening surgery sessions on a rotating basis. Pre-bookable routine appointments are opened for booking three days in advance. Some appointments are reserved for urgent on-the-day appointment requests. Nurse practitioner sessions are also reserved for on-the-day urgent problems. Urgent telephone calls are managed by the on-call doctor. Other calls are usually booked into specific telephone appointments in the early afternoon. On a rota basis, one GP and one nurse holds a Saturday morning pre-booked clinics.

Meetings

All the doctors meet on Wednesdays at 8am with the District Nurse Sister, when patients on the Gold Standards Framework Register and any other pressing patient issues are discussed. We are then joined at 8.20am by the Practice Business Manager, a member of the administration team, a senior practice nurse and the Clinical Pharmacist for the "Weekly Practice Meeting" in which practice matters, prescribing, audit, significant events, NICE reviews and a whole host

of other issues are discussed, an agenda having been circulated beforehand. Sometimes external speakers are invited. Team members cascade information to their colleagues as necessary.

There are also separate team meetings for administration, nursing and reception staff. All these are overseen by the Practice Business Manager and the responsible partner.

An informal meeting is held monthly to discuss clinical or other relevant topics. Anyone can attend and lunch time snacks are provided. All teams are scheduled to lead the meeting on a topic of their choice.

Twelve meetings a year (QUEST) are supported by the CCG and we use these as an opportunity to update mandatory skills, clinical skills, training staff, and an annual away-day for the whole practice and attached staff.

Training and Education

The Practice has a long and successful track record for training GP registrars, medical students and nurses. Delivering medical education is very much an integral philosophy of the practice. All the GPs are involved in giving tutorials and debriefing registrars. Three partners are approved trainers (two partners are approved clinical supervisors whilst one other partner is additionally approved as an educational supervisor). We have regular medical student placements, and the nurses mentor student nurses.

In terms of developing our own knowledge, the Practice is closed to patients for team meetings at the twelve QUEST meetings each year. These sessions are attended by the doctors, nurses and clinical pharmacist and include child protection reviews, CPR training, annual health and safety and information governance updates. Learning needs are collated and a programme is planned to incorporate these, sometimes involving external invited speakers or attending external meetings. The administrative and reception staff either join these sessions or have their own updates at these times.

Organisation of Care

Chronic disease management is carried out as a team effort involving the Doctors, Practice and District Nurses, Advanced Clinical Practitioner and the Clinical Pharmacist. Currently the nursing staff role in chronic disease management is being increased with a view to freeing up doctor time for other activities within the Practice.

The Practice hosts an experienced Clinical Pharmacist. In addition to her training roles within the practice (including clinical updates regarding changes in guidelines and prescribing practice) she is responsible for medicines management within the Practice. She consults patients with various chronic diseases, and performs medication reviews. In addition to the Clinical Pharmacist, three of our nurse practitioners are independent prescribers.

The Practice uses a formulary to assist in rational and cost-effective prescribing and there are tailor-made disease templates on SystemOne to aid clinicians in delivering excellent patient care whilst maximising QOF achievement.

Rota

The rota is organised in a partly flexible manner. Currently there are four GPs working six sessions per week, one partner working five sessions and two partners working four sessions. Some days are fixed and start times flexible to allow for child care arrangements. In addition, an extended hours surgery takes place each Saturday morning (8:00am to 12:15pm). Doctors do not work a fixed week, but prefer to work flexibly in order to provide better cover; this is advantageous both to the Practice and to the individual. The rota is generally prepared six weeks in advance, and requests can be made for half days etc which allows for long weekends, courses, family events to be taken without using holiday allowances. Usually most requests can be accommodated and on the rare occasions when there is a clash, a compromise resolves the problem. For the sake of fairness, potentially contentious parts of the rota are tallied e.g. Friday afternoons, on call days and Saturday mornings.

Partnership Agreement and Other Important Information

Leave

- Seven weeks annual leave (calculated 1st Jan to 31st Dec), which includes optional study leave. All holidays are by mutual agreement with partners. Leave is also given to all partners to allow for attendance at the half day practice training sessions. Additional leave is granted for other essential educational activities that are required for the Practice (for example smear training, training for the child protection lead, Trainer support etc.).
- Maternity leave 35 weeks (13 weeks of which are practice-funded).
- Paternity leave 2 weeks.
- Three-month sabbatical (at own expense) can be taken after every five years of continuous service.

Parity

- Twelve months mutual assessment.
- Buy in at one year which would include buying into a share of the property (Capital Account).
- The offer of partnership is dependent on the buy-in process being completed.

Profit Share

The new partner would receive 90% of profit share according to sessions for first six months followed by parity share (i.e. 100%). Please note that eligibility for profit share of notional and pharmacy rent commences on buying into the Capital Account.

Finance

A copy of the most recent practice accounts is available for inspection.

- Average GMS income.
- Additional income from private work which is distributed fairly with the doctor keeping their own fees.

Partnership Deed

A current Partnership Deed is available for inspection. This was agreed and signed on 06/01/2018.

Pharmacy

Currently the pharmacy business (Arthur Medical Services Limited, trading as Amber Pharmacy) is wholly owned by four of the partners (Drs McKenzie, Wilton, Woodier, Pontin) and Dr Crowley, retired partner.

The Practice has relinquished its dispensary rights in preparation for the possible sale of the Amber Pharmacy. Therefore, there will be no option to buy shares in the pharmacy.