



PRIMARY CARE NETWORKS DUE DILIGENCE QUESTIONNAIRE

Please complete all sections of the following questionnaire and attach any documents that are defined within each of the sections. The documents can be embedded within this questionnaire or sent in a zip file. Only information relating to the past 24 months, unless specified otherwise, should be provided.

1. PARTNERS

- a. Please provide details of any companies incorporated by the Partners or companies in which the Partners hold shares including shares owned by the practice in a Federation.
- b. Please provide the full name and address of any Federation you are a member of including the number of shares partners hold and their value.
- c. Please provide details of the Partnership equity and shares.
- d. Please declare any partnership disputes (financial or otherwise) occurring in the last 3 years.
- e. What are the exit arrangements for leaving Partners including but not limited to financial payments?
- f. Please provide details of all loans in relation to the Practice including loans to and from the Partners.

2. CONTRACTS FOR THE DELIVERY OF MEDICAL SERVICES

- a. Do you hold a GMS, PMS or APMS contract?
- b. Please provide details of any medical services contract(s) held by the Practice including, but not limited to core contracts and relevant sub-contracts.
 - i. Name of contract provider, type of contract and term of the contract.
 - ii. Provisions for termination.
 - iii. Contract price
 - iv. Signatories to the contract.
- c. Please provide information regarding any changes to the practice patient list size.
- d. Provide any detail regarding any core contract remedial notices and/or breach notices.
- e. Please declare if you have ever been in breach of any contract held by the partners/practice, via a commissioner, outside of your GMS/PMS contract.

3. FINANCE

Please ensure that accountants are instructed to undertake all financial due diligence and provide relevant details on the finances and financial viability of the Practice(s) Instructed.

- a. Please indicate if you have instructed accountants and if so, who you have appointed.

4. REAL PROPERTY

- a. Please provide the full address and post code of any property from which the Partners operate the Practice.
- b. Please provide details of the current ownership arrangements relating to any property detailed in clause 6 a above including:
 - i. The Freehold or Leasehold; provide a copy of any terms of occupation i.e. Lease
 - ii. The Identities of the freehold owners or landlord;
 - iii. Please declare whether the Practice has a Reserve fund or Sinking fund in place.
 - iv. Any covenants on the practice or within the lease.

NB: Please note that LMC Law are not property lawyers.

You will need to consult with a property lawyer in respect of any matters regarding due diligence, or any other matter in relation to premises. We can refer on your behalf, with your consent, if requested and subject to our Terms and Conditions. Please note that any referral, or work in respect of property is subject to a separate charge.

5. EMPLOYEES

Please provide details of all employees wholly or mainly employed in the practice as follows:

- a. Please provide a list of staff job roles and provide copies of associated job descriptions, standard employment contracts used by the Practice and any contracts of employment for anyone not employed on a standard employment contract. Include details of any offers, promises or agreements or any future variations in any contract of employment for any employees.
- b. Please provide anonymised details of anyone working for or in the Practice who is not a Practice employee and provide any associated MOUs or Sub-Contracting/staff sharing Agreements.
- c. Please confirm (where appropriate) that employees are fully registered, and compliant with appropriate regulatory bodies and organisations and provide copies of relevant regulatory body certificates.
- d. Please provide length of continuous employment.
- e. Please provide expiry dates of any fixed term employment.
- f. What are the notice periods for termination of employment?
- g. Please indicate staff turnover in the past 3 years.
- h. Please provide details of any and all sickness and/or unauthorised absence taken by employees within the last 24 months.

- i. Please provide details of any person currently or previously employed by the Practice who is on secondment, long-term sick, maternity or other leave or who has a right to return to work or a right to be reinstated or re-engaged in the Practice or to any other compensation.
- j. Please detail any employees or Partners who have received or have given notice or are likely to give notice to terminate their employment in connection with the Practice, including details of the reasons for such notice?
- k. Are there any known planned retirements within the next five years?
- l. Please provide details of any claims (actual or potential) through an Employment Tribunal or otherwise against the Practice within the last 3 years (whether successful or not).
- m. Please provide details of any ongoing disputes or complaints against the Practice (actual or potential) or against any employee of the Practice.
- n. Please disclose any disciplinaries, warnings or any other issues taken by the Practice against any employee in relation to performance or any other issue.
- o. Please provide details of salaries including any incentive arrangements/benefits or bonuses.
- p. Please provide details of any relevant documents relating to existing or proposed bonus schemes, commission, profit sharing, salary sacrifice or any other scheme or arrangement under which the employees would be entitled to participate.

6. LOCUM/AGENCY WORKERS

- a. Please disclose the number of Locums and agency workers you currently engage including:
 - i. The terms and conditions of the arrangements; provide any contract of employment;
 - ii. The Length of service, including any long-term locums who have been with the Practice for a period of more than three months.
 - iii. The number of sessions and whether this is on a regular basis;
- b. Please indicate Locum/agency workers costs.

7. CLINICAL STANDARDS (CQC)

- a. Please provide copies of the Practice's most recent CQC report.
- b. Please provide the CQC registration documentation.
- c. Indicate any issues in relation to any audits or CQC inspections stating clearly what these are, the date upon which the issue arose, whether the issue is on-going, and any conditions imposed by CQC. Include copies of any CQC Action plans, where applicable from the most recent CQC inspection.

8. COMPLAINTS

- a. Please provide details of any complaints against the practice within the past 24 months.
- b. Please provide copies of relevant documents relating to any ongoing or threatened litigation, arbitration, mediation or similar proceedings or disputes with third parties (including patients and/or guardians) brought against the Practice and/or the Partner(s).

9. INSURANCE

- a. Please confirm that all medical indemnity insurance for GPs and other relevant healthcare professionals is in place and up to date.
- b. Please provide insurance schedules or documents relating to all insurance the practice has in place including, but not limited to public liability (provide certificate), practice/practice property, employment/HR/sickness, locum insurance and any arrangements for the Partner(s).
- c. Please include details of the nature and amount of cover, name and address of the insurer(s), annual premiums (including evidence of latest premiums paid), renewal date and any outstanding claims.

10. INFORMATION GOVERNANCE

- a. Please provide a copy of your patient privacy notice and employee privacy notice produced under General Data Protection Regulations (GDPR).
- b. Please indicate who your designated Data Protection Officer (DPO) is and the measures you have put in place in the event the DPO is unavailable
- c. Please indicate if there have been any data breaches in the past 24 months and describe the measures taken to manage them

NOTES

This list is not exhaustive and is for guidance only. please ensure that all relevant and significant disclosures are made by each party that would in the reasonable opinion of the party concerned, affect the business and should reasonably be disclosed to the other party.

Any queries relating to the information request should be directed to:

[X] at [X PCN]