

Annex 13A

Template Application to Change the Practice Area

10.01.2020

Dear Team


Application to Change the Practice Area

Please provide the information below to the Commissioner no less than 28 days before the requested contract variation.

1. Affix practice stamp: **DERBY ROAD GROUP PRACTICE**
27-29 Derby Road
North End
Portsmouth
PO2 8HW

2. Provide full details of the proposed practice area:	To include Baffins and Highbury area – please see attached
3. Explain the reasons for the change of practice area:	We would like to change our Practice Boundary to incorporate Highbury and Baffins. Baffins was removed from our Practice area some time ago but we would like to re-add it and highbury as have patients living there already.
4. Provide any additional supporting evidence that may be relevant (e.g. current capacity, challenges or under utilised capacity, patient distributions, future service development plans (including knowledge of local developments such as housing):	Review of Practice area took place and agreed that we would re-instate Baffins as being within our boundary and add Highbury estate as to offer more patient choice.

Signed by



Date

10th January 2020.

Please note that this application does not impose any obligation on the Commissioner to agree to this application.

AEC

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 surgery + 50.82205, -1.07854