



ANNUAL

REPORT 2021

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COVENTRY
& RUGBY
GP ALLIANCE

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To Our Stakeholders



Dr Peter O'Brien
Chair

None of us knew what was coming in 2020/21 did we?

For us at the Alliance, as for everybody else, it was a strange year. Our new responsibility in the first wave of the pandemic was to set up ‘hot hub’ clinics with careful infection control processes, to see patients who may be suffering from Covid. We were able to mobilise services quickly, initially in three locations and then gradually reducing as the severity of the problem lessened.

At the same time the work of the extended access service changed to mainly remote consultations, in the same way as the majority of primary care at that time. We were able to continue providing the necessary amounts of appointments in both our ‘hot hubs’ and in the regular extended access service, being flexible as the circumstances changed.

Later on in the year we were also able to set up, at short notice, a ‘Covid at home’ service to provide 24/7 support to patients whose condition was not worrying enough to be in hospital, but still of sufficient concern that they needed extra monitoring.

The service was set up very efficiently, linking in appropriately to both primary and secondary care services. We received many glowing tributes from patients under the service reporting how much they valued the care they were receiving.

Our team of Portfolio Nurses, who we recruited early in 2020, did have their expected career development disrupted, but were greatly appreciated as they were able to help out when different parts of the primary care and community care nursing work force found their own resources stretched to the limit. We were also able to help out some practices when their reception staff were away from work at short notice.

This ability to respond quickly and be flexible has characterised much of our work over the years. Perhaps as a consequence of this, we have been joined by several new members of staff over the past year, who have come to us with great experience and expertise from primary care providers and commissioners.

We have continued our work in offering support to the Primary Care Networks in Coventry and Rugby. Most have used our services in taking on staff in the 'Additional Roles' (such as pharmacists and physicians assistants) and several have taken up our offer of full administrative support.

The other major event of the year for us was taking over control of four small GP practices in Coventry last July. This would have been a major undertaking at the best of times but given that we were doing this during the pandemic, with all sorts of social contact limited, it made this a MAJOR UNDERTAKING. Fortunately, we have had the benefit of inheriting some really good existing staff members at each of the surgeries, in addition to being able to recruit some excellent new staff members. We are confident that we are managing to improve the

care offered to patients in those surgeries and will continue to do so as we develop.

In taking on these practices we made a commitment that they should all be places that did teaching. We are already doing a lot of teaching for medical students from the Warwick Medical School and will branch out to support the development of administrative and other clinical staff.

We are aware that the future is uncertain (not least because so many of our contracts come to an end in the next year), but we are confident that we will still be a strong presence at the SIDE of general practice - Supporting, Innovating, Delivering and Educating.

Peter



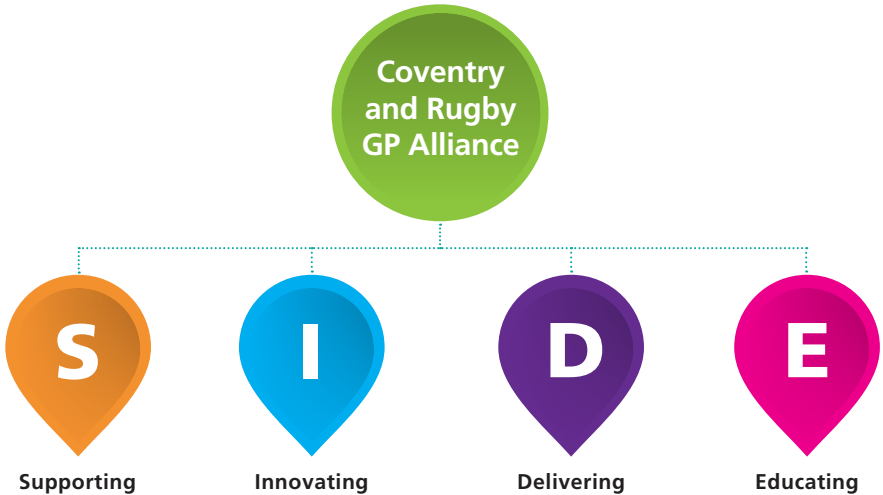
About Us

The Coventry & Rugby GP Alliance has been supporting local general practice and patients since 2015. We are a private company limited by shares, operating on a not-for-profit basis. As an organisation, we are wholly owned by local Coventry and Rugby GP practices (98% of eligible practices in Coventry, and 45% in Rugby.)

We are committed to supporting and delivering high quality primary care services to the local population.

Our mission is to “Strengthen primary care for a stronger NHS” and we will do this at the S.I.D.E of general practice:

- Supporting -**
our patients and communities; local general practice; PCNs; and the local health and social care system
- Innovating -**
being at the forefront of new innovations to better meet the needs of patients and general practice
- Developing -**
delivering high quality services to patients that support primary care, and represent value to the public purse
- Educating -**
roviding education and training opportunities to ensure primary care has the right workforce with the right skills



Our work Programme for 2020/21

2020/21 proved to be a real “stretch” year for our work programme as our services and people stepped up to the challenge of ensuring both service continuity and growth to meet the demands of patients, practices and the system during the pandemic.

Throughout the year, our clinicians, support teams and corporate staff have demonstrated agility, commitment and grit as they have responded to new ways of working and new service demand.

We are incredibly proud of our people and thank them all for their contribution during 2020/21.

In addition to our work at the S.I.D.E of local general practice, our noteworthy achievements of the year include:

- We undertook our staff survey in March 2021 to find out if staff felt safe, supported and engaged with the organisation. The survey results told us that there were high levels of staff satisfaction and 97% of respondents felt ‘safe and secure’ in their working environment. This was testament to our focus on staff wellbeing and providing them with the tools and flexibility to continue working safely.
- We successfully launched our corporate apprenticeship programme to provide a springboard to new career development for local people. We have taken on four apprentices across our corporate functions.
- Recognising the need to recruit and retain Nurses to work in Primary Care, we introduced a Nurse Development Programme. We employed our first cohort of Practice Portfolio Nurses - providing qualified nurses with an opportunity to work in primary care – and much needed resilience this year.

- We implemented a Health Care Assistant Development Programme, and recruited a team of HCAs who have worked incredibly hard to increase local uptake of Annual Health Checks for people with an SMI.
- Our Operations Team – who are at the heart of our co-ordinated service delivery – have constantly adapted to new challenges and services
- Our corporate support teams have navigated changing policies and procedures during the pandemic to enable us to maintain business continuity and keep our staff safe.
- We have continued to recruit staff on behalf of our PCNs to support them with fulfilling the Additional Roles Reimbursement Scheme (ARRS), particularly around Clinical Pharmacists and Physicians Associates.
- We have also built strong relationships with the UHCW AHP Team where we have worked collaboratively to deliver ARRS roles to our PCNs, including Dieticians, Occupational Therapists and First Contact Practitioners.
- All of these new roles are supported through a strong relationship with the Coventry and Warwickshire Training Hub.

As both a service provider and employer, we know that we still have improvements to make. We are proud of the progress our services and staff have made on our improvement journey over the past year and we look forward to continuing our contribution to local care delivery and meeting ICS priorities over the coming years.

Supporting

As part of our supporting workstream we have provided much needed support and capacity to practices and PCNs by developing and delivering services such as;

Covid-19 Hot Hubs

The pandemic – whilst challenging – showed us how systems can come together quickly and effectively. The Covid-19 Hot Clinics was one such example. Within two weeks of the first national lockdown being announced, we had operationalised primary care Hot Clinics with CCG and PCN partners, enabling patients suspected of Covid-19 to be seen safely within primary care at a small number of selected sites.

We rapidly addressed initial concerns about how to minimise the spread of the virus and the availability of suitable PPE by developing clear infection prevention and control processes and patient flows; we developed video training materials uploaded to YouTube – to give staff working in the clinics assurance and confidence that it was safe to do so; and who can forget the pink and mauve scrubs!



“I was apprehensive about working at the Hot Clinic until I saw the training video which really reassured me.”

Coventry GP

The CCG required a place-based approach to Hot Clinic delivery, and we adapted the service to meet the local priorities in each area. We co-ordinated clinics across Coventry and Warwickshire North, working closely with PCN leads to facilitate “fair share” scheduling of the GP workforce so the burden of staffing the Hot Clinics was shared by all PCNs. In Rugby, we supported practices to set up IT solutions and provided Hot Clinic access out of hours. We re-purposed Alliance staff to bolster the Hot Clinic workforce at this much needed time; this included Medical Notes Summarisers, locum GPs, receptionists and Ops Leads who were flexed across the county to work alongside PCN colleagues.

As the pandemic progressed and demand for general practice increased, we took over the full delivery of the Hot Clinics in Coventry whilst continuing to support Warwickshire North.

As of today, we fully deliver Hot Clinics across Coventry and Warwickshire North, closely monitoring utilisation and working closely with the CCG on escalation / de-escalation plans, as dictated by local demand.

PCN Business Development and Support Unit

Since the inception of Primary Care Networks (PCNs) in July 2019, where all of our Member practices committed to being a part of the delivery of the Network Contract DES, the pressure and workload on PCNs and practices has quickly built up. Coupled with a Global pandemic, the 'ask' of them became almost unmanageable during 2020/21.

The Alliance spotted an opportunity to provide additional support and economies of scale to PCNs, and from Autumn 2020, developed the Business Support Unit (BSU). Built on the principles of Right work, Right person, Best value, we developed our PCN BSU to provide the right balance of administrative and management skills and expertise to support PCNs to optimise the PCN Network Contract DES investment and deliver the contract requirements, as well other funded programmes of work. The intention of this service has been to try and separate the demands imposed by the PCN requirements from day-to-day practice requirements through a dedicated team.



The BSU teams therefore supports with work such as:

- ARRS recruitment and support
- Financial planning, management and support
- Strategic planning
- Workforce planning
- Admin support for PCN meetings
- Emergency Steroid Card Scheme
- Web Site Re-Design and Update
- Legal Entity Scheme
- PBT EMIS Access Pilot
- Supporting with IIF Schemes
- Submitting ARRS Claims
- Carers Accreditation Scheme (Unity only at present)
- Myton Hospice Pilot

This level of support has enabled the PCN Clinical Directors and their Practice Managers to focus on delivering the General Practice priorities such as Covid Vaccination Clinics, seeing patients and other core business.

In addition to supporting the PCNs with the delivery of their Network Contract DES, the BSU also looks to identify new opportunities that can benefit either all PCNs, or just one or two who choose to adopt it.

Examples include innovative service models for ARRS roles to optimise recruitment, retention and impact; a workforce resilience offer for all PCNs/practices; an EMIS Enterprise support offer; facilitating shared roles with other organisations such as UHCW, Age UK, MIND in order to get the appropriate workforce in the most efficient manner.

"Over the past 12 months Age UK Coventry and Warwickshire and the Alliance has worked together to facilitate the SPLW roles in the PCNs and although this has been a unique and challenging year, have ensured vulnerable patients have had access to essential support. Working together we have developed and established shared ways of working and good practice to ensure this is done effectively whilst working within the differences of the individual PCNs."

Jo Judges, Director of Services at Age UK

"The implementation of additional roles to primary care offers much opportunity to diversify the clinical teams within Primary care networks. A number of these roles are from the Allied health professions.

Recognising that the numbers of allied health professionals will be small and there is no professional leads within PCNs for this staff group GP Alliance have worked in collaboration with UHCW and CWPT to develop appropriate job descriptions, workforce models and recruitment to these roles.

By working in collaboration, it has offered opportunity to develop roles whereby appropriate training and development are in place and there is integration along clinical pathways which ensures the patients gets the right care from the outset."

Clare Pheasant, Associate Director of Allied Health Professionals at UHCW

Jo Shaw, our Chief Primary Care Officer, leads our PCN Support team and describes the service as;

"Always responsive, we listen, learn and act on the feedback shared with us. Whatever is needed from our service, we try our best to provide it. Our door is always open, and no one is too busy to help or answer any questions that PCNs may have. We have worked hard to develop a service that makes it easier for PCNs to deliver their responsibilities, particularly this year, as our PCNs and the practices within them have been responding to the challenges of the COVID-19 Pandemic."

Feedback from practices/PCNs

"Just wanted to say a massive thank you Matt for this morning's meeting, and also all you're doing to getting things sorted! You're a God send - especially during these crazy times!!! **THANK YOU!!!!**"

Kali Donsanj,
Practice Manager in Central

"Matt you are truly a life saver. Thank you so much."

Gina Moore,
Practice Manager in Central

"Go West have purchased the Platinum Service from the Alliance, and this has really helped us with our organisation and future planning for the network. The Alliance supplies all our admin support, and this has taken the pressure off the practices and helped us secure PMS bids and new ARRS roles."

Eve Pollard,
PCN CD for Go West

Innovating

DESMOND

With face-to-face contact being restricted this year, we moved to a new delivery model for DESMOND, the NICE-approved structured education programme for people with Type 2 Diabetes. Traditionally delivered in person for small groups, our DESMOND educators were passionate about continuing to deliver training and support to people during the pandemic.

When face-to-face sessions were first required to be stood down, our DESMOND team contacted patients to answer any questions they had, provide them with support and reassurance that they would receive a service. Quite quickly, MYDESMOND - the digital version of the course - was made available to those that had started but not completed the course.

Our Educators were then trained to deliver the service in a virtual classroom, re-establishing the peer support element that the e-learning, package lacked for patients. By doing this, we have been able to continue to provide a much needed service and access to a team of professionals for support – albeit remotely – during a difficult time.

The Alliance has been recognised by the National DESMOND team as being one area in the country that has been successful in both implementing virtual classrooms and getting patients to join in. As with many of our services this year, our patients have told us how much they have benefitted by being in touch with our teams and services.

Covid Oximetry @ Home

This year has provided endless opportunities to work differently and to better incorporate the use of technology to deliver more care, more safely, more efficiently - which is exactly what our Covid Oximetry@Home service does.

In partnership with South Warwickshire GP Federation, we operationalised a new service in potentially record-breaking time – with patients being admitted within four days of the service being commissioned.

The service supports people who are suspected or confirmed as being Covid positive but their symptoms suggest they can be managed at home.

Patients and their experience are at the heart of this service – we set it up in a way that makes it easy for patients to engage with and to feel supported by. Within an hour of referral, patients will have a pulse oximeter; an information pack – including links to materials in non-English languages; and a Care Co-Ordinator on the phone to talk them through the service and what is expected of them; and to let them know that they can call 24/7 if needed.

Our GPs provide a daily Virtual Ward Round to review those patients who are showing signs of deterioration, calling them when a clinical consultation is needed to discuss symptoms and actions.

We initially set the service up to take step-up referrals from GPs, Emergency Departments and Urgent Treatment Centres – to provide an alternative to acute admissions where they weren't required, and in doing so, reducing the burden on local hospitals. Very quickly, we expanded the scope to take step-down referrals from acute respiratory wards from all three local hospitals. By working closely with local CCGs and

Having the oxygen and support of staff helped me manage moving home from hospital – I'm certain I would have been re-admitted without it and later, as I improved, it helped me to manage my breathing problems until I could confidently cope without it. I feel very fortunate to have been part of this scheme.

NHS partners, we set clear referral criteria and system-wide agreed pathways to facilitate the early discharge of patients. This has enabled people to leave hospital earlier than planned with the safety net of a team to monitor them when home; whilst continuing to free up much needed hospital bed capacity.

We then further expanded the service to include the use of Docabo, a remote monitoring technology for patients to send readings from their pulse oximeters via an app on their phones. This is offered as an additional option – but patients can still opt to text or to call in their results if they don't have access to smart phones. Or, as we have found through our patient feedback – speaking to someone over the phone is invaluable human contact during such a scary time for them.

At the height of the service, we have supported 77 people on a single day to manage their symptoms in the safety of their own home, surrounded by their family and carers.

"The added support was a weight off my shoulders and gave me extra reassurance that someone out there was with you as you recovered from this frightening illness."

Without Covid Oximetry@Home, many of these patients would undoubtedly have been admitted to hospital and been in a bed that could have been used by someone more acutely unwell and at risk of further exacerbating their condition.

This service provides a virtual increase in capacity that enables us to look after more patients and deliver better outcomes for people whilst they remain in the comfort of their own homes.

Diabetes Specialist Nurse

We helped to establish a Diabetes Specialist Nurse Proof of Concept service in August 2020, in collaboration with Navigation PCN in Coventry, and Coventry & Warwickshire NHS Partnership Trust. An initial cohort of patients were identified for review, with many receiving ongoing support for their Diabetes. Consultations took place over the phone, in the practice and via home visits when needed. Local clinical teams had access to timely specialist support, and dedicated training sessions. Quite quickly, the scheme resulted in a significant reduction in referrals from the PCN to secondary care – with practices better able to manage their patients in general practice - and there are plans now to expand the scheme to the rest of Coventry.



Delivering

In a year when much of the country was forced to lock down, our staff have continued to work incredibly hard to support both the establishment of new services whilst at the same time, maintaining core service delivery. During an exceptionally challenging time, and with added safety precautions, our **Paramedics** continued to see patients in their homes, and our **Admiral Nurses** provided much needed support to their patients, families and carers. **Extended Access** clinics continued to be delivered across Coventry, Rugby and Warwickshire North, and staff from the **Medical Notes Summarising Service** were redeployed to support the new Hot Clinics. Much of the feedback from patients this year has been how invaluable the continued contact with staff and services has been during such a stressful time.

In the midst of this, we took our first foray into core general practice by taking over not one, but four Coventry APMS practices! Having been awarded the contract in July 2020, we first focussed on bringing the “Alliance Teaching Practices” under a single management structure and strengthened leadership team. Whilst we remain committed to local, accessible care at each of the four sites, the practices have been formally merged into one to provide added resilience and cross-site support.



New administrative and support roles have been introduced, and we have invested in a new telephone system to support call handling across all four sites, significantly reducing the time patients spend calling the surgeries.

We have employed a good team of local GPs – reducing a reliance on locum GPs and giving local patients some added continuity of care. A new Nurse Lead has been appointed who will support and develop our nursing and HCA workforce. Working closely with Warwick Medical School, we welcomed the first of many medical student cohorts in September 2020. Moving forward, we will build on this partnership to establish the merged Practice as a test bed of innovation and excellence through our “Alliance Academy”, whilst welcoming students from other clinical and administrative roles.

Just ahead of the Practice’s first anniversary, First Practice Management recognised the ATPs as “Practice of the Month” for our efforts to support the local patient population. This has included dedicated clinics with an onsite interpreter for non-English speaking patients, helping to improve the uptake of screening, health checks and medication reviews.

We also worked with local PCNs to deliver flu vaccination schemes. Our Practice Portfolio Nurses got on the bus – literally (we hired a mini bus!) with Go West PCN colleagues to deliver flu vaccines to housebound patients; whilst travelling around Coventry and Warwickshire North to do the same for care home residents.

Educating

Our Clinical Educators responded quickly to support practices and PCNs by developing and delivering a bespoke training package which ensured that new, and returning, vaccinators could deliver covid vaccinations safely and effectively. This included some of the new roles working within primary care, such as Clinical Pharmacists, providing additional capacity for colleagues delivering the covid vaccination clinics. We delivered weekly sessions to clinical staff across Coventry and Warwickshire, ensuring the training reflected the most up to date guidance and course content.

In addition to this our Clinical Educators and Training Team worked hard to ensure our local nursing work force had access to accredited training for cervical cytology sample taking training. Working with the Royal College of Nursing and the Nursing and Midwifery Council we provided the evidence and assurances that allowed our course to be accredited for delivery to Nursing Associates, as well as registered Nurses. This is a great benefit to our practices and our patients as these roles can be utilised to undertake this important procedure.



The Year Ahead

As we move forwards and into the new NHS landscape of Integrated Care Systems, the future presents both opportunity and some uncertainty for the Alliance.

We will use this year to continue to build on our achievements of 2020/21 and on the robust partnerships and foundations we have built at Place and System level, to continue to deliver resilient and co-ordinated services that strengthen primary care for a stronger local NHS. We will seek out opportunities to develop and grow our service offers so that we remain sustainable and continue to support local primary care.

Our key areas of work will focus on:

- Delivering responsive and accessible resilience services to practices, to support them with service continuity to meet workforce gaps and surges in demand
- Working with PCNs to support delivery of the Network Contract DES and to facilitate the transfer of Extended Access Service delivery
- Working with Federation partners to provide at-scale primary care services, and to support the Integrated Care System.
- Working with Provider Collaborative partners to develop integrated services that enable patients to access care out of hospital.

We have a track record of being responsive and agile, providing new service developments and support at pace. Sometimes, this has meant that we don't always deliver a polished product at service launch, but as part of our continuous quality improvement approach, we do listen to feedback and work hard to continually refine our service delivery models to ensure they meet the needs of patients and local primary care.

Looking back over the past year, GP Alliances and Federations across the country have demonstrated the valuable role they play within local systems - providing local primary care services and at-scale System and Place level support. In the year ahead, their role will never have been more important as general practice and systems work to fully restore services, maintain Covid response services and recover access to planned care. At the Alliance, we will be here – continuing to [Support, Innovate, Deliver and Educate](#).



Our journey

KEY:  SUPPORTING  INNOVATING  DELIVERING  EDUCATING



Showcasing our Platinum Offer PCNs

Primary Care Networks bring practices together to work at scale, improving resilience and delivering integrated services with the wider health and care system.

Whilst each network is individual, they face similar challenges as they deliver against the Network Contract DES, which results in duplication and increased infrastructure costs.

We have worked closely with our Platinum Offer PCNs to provide economies of scale with full network support, reducing costs and providing additional resilience and support. This support enables our PCNs to set more ambitious work programmes and progress together more quickly than they would as individuals.

Our PCNs have been successful in achieving their priorities in 2020/21 and are now making progress to achieve their ambition for next year.

We currently have three PCNs that benefit from our Platinum offer, with a further one coming on board in July 2021.

Central Primary Care Network



Central is a small yet perfectly formed PCN with a strong ethos of 'together'.

Practices in the PCN

- Bredon Avenue
- Coventry GP Group of Practices
- Quinton Park Medical Centre
- Sky Blue Medical Centre

Key achievements this year

- Working together to mobilise our Covid vaccination clinic
- Successfully recruiting to a number of new Additional Reimbursable Roles, which provide additional appointment types to patients, including:
 - 1 Physician Associate
 - 2 Clinical Pharmacists
 - 3 Social Prescribing Link Workers
 - 1 Dietician
 - 1 First Contact Physiotherapist
- Working with the CRGPA Business Support Unity to update and refresh all practice websites and develop a PCN level portal
- Implementing AccuRx for improved patient experience

Focus for next year

- Succession planning for a new Clinical Director from January 2022
- Develop a working relationship with Myton Hospice to support patients and carers
- Continue to maximise the reimbursable roles to support general practice, with a focus on recruiting additional Clinical Pharmacists, Physician Associates and an Occupational Therapist, which will support us to continue to provide great patient care



Clinical Director,
Dr Hergeven Dosanjh

Showcasing our Platinum Offer PCNs

Go West Primary Care Network 49,414 patients

Go West is based in the West of Coventry and made up of like-minded practices who have shared vision and values.

Practices in the PCN

- Forrest Medical Centre
- Jubilee Healthcare
- Kensington Road Surgery
- Limbrick Wood Surgery
- Westwood Medical Centre
- Woodside Medical Centre

Key achievements this year

- Working together to mobilise our Covid vaccination clinic and vaccinating 29,947 1st doses and 22,147 2nd doses
- Successfully recruiting to a number of new Additional Reimbursable Roles, which provide additional appointment types to patients, including:
 - 1 Physician Associate
 - 4 Clinical Pharmacists
 - 1 Social Prescribing Link Workers
 - 1 First Contact Physiotherapist
- Implementing AccuRx for improved patient experience

Focus for next year

- Develop a working relationship with Myton Hospice to support patients and carers
- Continue to maximise the reimbursable roles to support general practice, with a focus on recruiting 2 Paramedics, 2 Health and Wellbeing Coaches and 1 FCP
- Continue to provide great patient care
- We have employed a GP champion to improve our screening rates and raise patient's awareness of cancer aiming to get earlier diagnosis and treatment
- Continue to work with CRGPA to access support and resilience
- Pilot a scheme where our PBT has access to patient records within EMIS



Clinical Director,
Dr Eve Pollard

Unity Primary Care Network 60,600 patients

With three large practices who serve a large student population, Unity PCN was founded on the principles of 'stronger together'.

Practices in the PCN

- Allesley Park Medical Centre
- Broomfield Park Medical Centre
- Engleton House Surgery

Key achievements this year

- Working together to mobilise our Covid vaccination clinic and vaccinating 29,167 1st doses and 15,694 2nd doses (and counting!)
- Successfully recruiting to a number of new Additional Reimbursable Roles, which provide additional appointment types to patients, including:
 - 1 Physician Associate
 - 5 Clinical Pharmacists
 - 3 Social Prescribing Link Workers
 - 1 First Contact Physiotherapist
- Implementing AccuRx for improved patient experience
- Introducing a monthly newsletter to increase communication with practices
- Delivering a heart failure project to benefit our patient population as well as working with the Carers Trust UK to support our carers
- Implementing a new IT system, Primary Care pathways to support our practices

Focus for next year

- Working with our new Clinical Director
- Forming a limited company
- Working with Myton Hospice
- Continue to maximise the reimbursable roles to support general practice, with a focus on recruiting 1 x Clinical Pharmacist, 1 x Physician Associate, 1 x Occupational Therapist, 3 x Pharmacy Technicians, 1 x Care Co-ordinator and 1 x Dietician
- Population health management and services to support this, including a proof of concept integrated neighbourhood team service
- Continue to work with CRGPA to access support and resilience



Clinical Director from July 2021
Dr Tejinder Lyall

Patient and Stakeholder Feedback

As an organisation we recognise the importance of good engagement with our stakeholders, including staff, shareholders, patients and partners.

Imagine a service that 'starts with the patient' - a service that listens to the patient and family needs, and then utilises the skills and expertise of both the clinician and patient to design the experience to meet these needs. That's what using patient experience information is all about. Ultimately by consistently asking people whether they are receiving the care they need and then improving things on the basis of what they tell you will help patients feel more supported and better cared for.

We have developed an Engagement and Experience framework to embed a consistent, organisation wide approach to engagement and experience with stakeholders by adopting three key principles.



Listen

We will listen to what we are told is important to patients for their care, and service delivery needs, and provide a range of inclusive and accessible ways in which we can hear what they want to say to us.



Learn

We will review feedback through our governance processes to identify any themes and trends and what they are telling us about our service delivery.



Act

We will identify any actions or improvements we need to make, and ensure we share how feedback has made a difference.

Since May we have implemented patient satisfaction systems for all our patient facing services. This provides patients and carers with the opportunity to share their views and gives us the opportunity to learn from their feedback - so far over 600 patients and carers have shared their views.

We have worked with our Alliance Teaching Practice staff to develop regular communications, including a monthly patient newsletter, which is translated into a number of languages, to ensure inclusion.

We will continue to revitalise our patient groups and increase our channels of communication to ensure they are inclusive and accessible for all patients and carers. We will do this by providing a range of methods to facilitate participation, including online, virtual and face to face options.



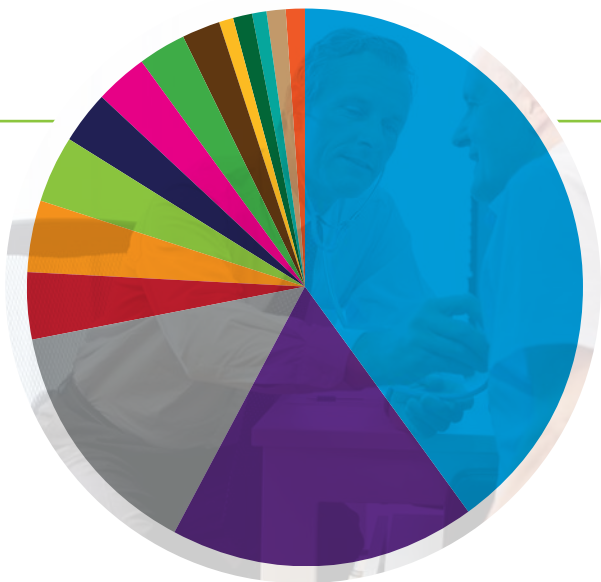
Financial

Our Income

The Alliance received income totalling £9.026m in 2020/21 compared to income of £4.831m in 2019/20, an increase of 86%.

A breakdown of our income is shown in the table below:

Service	Source	Income
		000s
Extended Access	Coventry & Warwickshire CCG	3,632
ATPs	Coventry & Warwickshire CCG/ PHSE	1,635
PCN Support Services	PCNs	1,260
PAVS	Coventry & Warwickshire CCG	384
Training	Various	376
Miscellaneous Income	Various	320
Hot Hubs	Coventry & Warwickshire CCG	304
Admiral Nurses	Coventry & Warwickshire CCG	299
MOU	Coventry & Warwickshire CCG	250
Notes Summarising	Coventry & Warwickshire CCG	199
LMC Income	Coventry & Warwickshire CCG	86
Macmillan	Macmillan	82
Covid @ home	Coventry & Warwickshire CCG	81
DESMOND	Coventry & Warwickshire CCG	63
SMI's	Coventry & Warwickshire CCG	54
Total		9,026



KEY

Extended Access	40%
ATPs	18%
PCN Support Services	14%
PAVS	4%
Training	4%
Miscellaneous Income	4%
Hot Hubs	3%
Admiral Nurses	3%
MOU	3%
Notes Summarising	2%
LMC Income	1%
Macmillan	1%
Covid @ home	1%
DESMOND	1%
SMI's	1%

During 2020/21, the Alliance developed its service offer significantly, generating additional income and making steps to reduce our dependence on the Extended Access contract in advance of the service's transfer to the Network Contract DES from 2022/23. Our income from sources other than Extended Access grew by £3.842m which has reduced the % that Extended Access contributes to our overall income from 68% to 40%.

Key areas of service growth include:

ATPs

The Alliance was awarded APMS contracts and took over the running of 4 Coventry practices in July 2020. These contracts allow the practices to earn a premium payment of up to 5% for achieving mandated access, appointments and performance targets.

Our business plan for the practices included generating income through medical student teaching. Unfortunately, our year 1 income target was not achieved due to Covid affecting student numbers.

PCN Support Services

During 2020/21, the Alliance further developed its support service to PCNs by providing an enhanced PCN Business Support offer and expanding its Additional Reimbursable Role Scheme services in line with the growth in the national ARRS fund. Our ARRS workforce increased from 13 to 40 as we supported PCNs to maximise the national investment in new roles.

PAVS

The Paramedic Acute Visiting Service pilot that the Alliance launched in Coventry in July 2019 was commissioned on a full year basis in 2020/21 including an additional car to expand the service into Rugby.

Financial continued

Our Spending

The Alliance's spending amounted to £9.126m in 2020/21, compared to £4.764m in 2019/20. A breakdown in our spending is shown below:

Cost Heading	Expenditure 2019/20	
Pay Costs	£000s	£000s
GP Locums	2,137	
Clinical & Support Service Staff	1,977	
ARRS Roles	1,178	
Corporate Staff	915	
Directors	159	
		6,366
Establishment Costs		
Electric Wharf	86	
Hub Charges	91	
		177
General Administrative Expenses		
IT equipment, software & support	313	
Stationery & Postage	13	
Training	125	
Legal Fees	13	
Professional services	34	
Insurance	14	
Medical Consumables	85	
CQC	1	
Accountancy	19	
Practice Charge	216	
Other Miscellaneous	102	
		935
Alliance Teaching Practices		
ATP Staffing Costs	961	
ATP Rent	187	
ATP - Non Pay	501	
		£1,649
Total		£9,126

2020/21 Annual Accounts

The annual accounts for the year 2020/21 have been prepared by Ballards LLP and show a reported loss of £100,171 compared to a profit before tax of £67,327 in 2019/20.

The Alliance is entitled to a refund of Corporation Tax of £19,032 as a result, leaving a post-tax loss of £81,139. The loss was attributable to the ATPs delivering a shortfall of £104,000 against the financial target for 2020/21 and this has been covered internally by the Alliance in year. The shortfall is expected to be recovered over the remainder of the 5 year contract period.

At the end of 2020/21, the Alliance had retained earnings of £686,780 representing the accumulated net profits since its incorporation.

Contingent Liabilities

As at the end of 2020/21, the Alliance is not aware of any potential liabilities which may crystallise in the 2021/22 financial year and which have not had adequate funds allocated to them. Therefore no provision has been made in the accounts to mitigate against such an occurrence.

Directors' Remuneration

Name	Role	Remuneration	Employer NIC	Employer Pension	Benefits in Kind	Start Date	End Date
		£	£	£	£		
P O'Brien	Chair	54,740.04	6,341.38	-	-	01/02/2019	
H Dosanjh ¹	Practice Director	22,808.30	1,934.80	-	-	01/04/2018	31/01/2021
I Taylor	Practice Director	17,727.60	1,235.40	-	-	01/11/2019	
HS Mann	Practice Director	17,727.60	1,233.67	2,549.28	-	01/11/2019	
P Sekhon	Practice Director	2,954.60	197.83	-	-	01/02/2021	
EA Kelly	Non-Executive Director	13,685.04	675.79	-	-	01/03/2017	
P Elkin	Non-Executive Director	13,685.04	675.79	-	-	01/08/2017	
P Marson	Non-Executive Director	1,140.42	40.76	-	-	01/03/2021	
Total		144,468.64	12,335.42	2,549.28	-		

Notes:

1. Dr Hergeven Dosanjh resigned from his role as Director on 31 January 2021.



Financial continued

Financial Governance

The Board has established three sub-committees, all of which are chaired by one of the Non-Executive Directors, to oversee the governance of the Alliance's financial affairs:

Remuneration Committee

The Committee is responsible for setting the remuneration for the Chair and all Practice Directors, including pension rights and any compensation payments. The Committee also recommends and monitors the level and structure of remuneration for senior management and all directly employed staff, including, but not limited to, employee terms and conditions and pay.

Finance & Performance Committee

The Committee was established by the Board to maintain an overview of the financial and business affairs of the Alliance. The primary objective of the Committee is to assist the Board in overseeing the financial risk management strategy, policy and treasury matters delegated to it by the Board, and in reviewing and approving major financial transactions on behalf of the Board. The Committee meets on a monthly basis and provides regular reports to the board on these matters and makes recommendations for any changes that need to be made to policies and procedures.

Audit Committee

The Audit Committee is responsible for providing assurance to the Board on the Alliance's system of internal control by means of independent and objective review of financial and corporate governance, and risk management arrangements including compliance with law, guidance, and regulations governing providers of NHS services.

Financial Assurance

At the Board's request, Ballards LLP have undertaken a review of the company's financial statements in accordance with ISRE2400 (Revised). This is a limited assurance engagement and primarily consists of making enquiries of management and others within the company, applying analytical procedures and evaluating evidence received.

Based on this review, Ballards LLP have reported that nothing has come to their attention to suggest that the accounts have not been prepared:

- to give a true and fair view of the state of the company's affairs at 31 March 2021, and of its profit for the year then ended;
- in accordance with United Kingdom Generally Accepted Accounting Practice; and
- in accordance with the requirements of the Companies Act 2006.

Looking Forward

Extended Access contracts for Coventry, Rugby and Warwickshire North have been extended to March 2022 and over the coming year the Alliance will work with PCNs to facilitate the service's transfer to PCN responsibility as part of the Network Contract DES from 1 April 2022.

The Alliance will continue to develop the Alliance Teaching Practices during year 2 of the contract to achieve the full year benefit of the improvement programme initiated in 2020/21. We anticipate that delivery of the improvement programme over the remaining contract term will enable the Alliance to recover the financial shortfall.

We will continue to identify opportunities to grow and diversify our service portfolio to support our financial sustainability.

Going Concern

The Alliance's financial position continues to be stable and the company is expected to remain viable in the foreseeable future.



Alliance Governance

Board



Dr Peter O'Brien
Chairman



Dr. Ian Taylor
Practice Director &
Speak Up Guardian



Dr Hardev Mann
Practice Director &
Caldicott Guardian



Dr. Prab Sekhon
Practice Director



Pat Marson
Non-Executive
Director



Paul Elkin
Non-Executive
Director



Eamonn Kelly
Non-Executive
Director



Melanie Duffy
Chief Executive
Officer & SIRO



Sarah Weir-Smith
Chief Nurse & Speak
Up Guardian



Dr Chris Taggart
Medical Director



Daljit Sandhu
Chief Operating
Officer



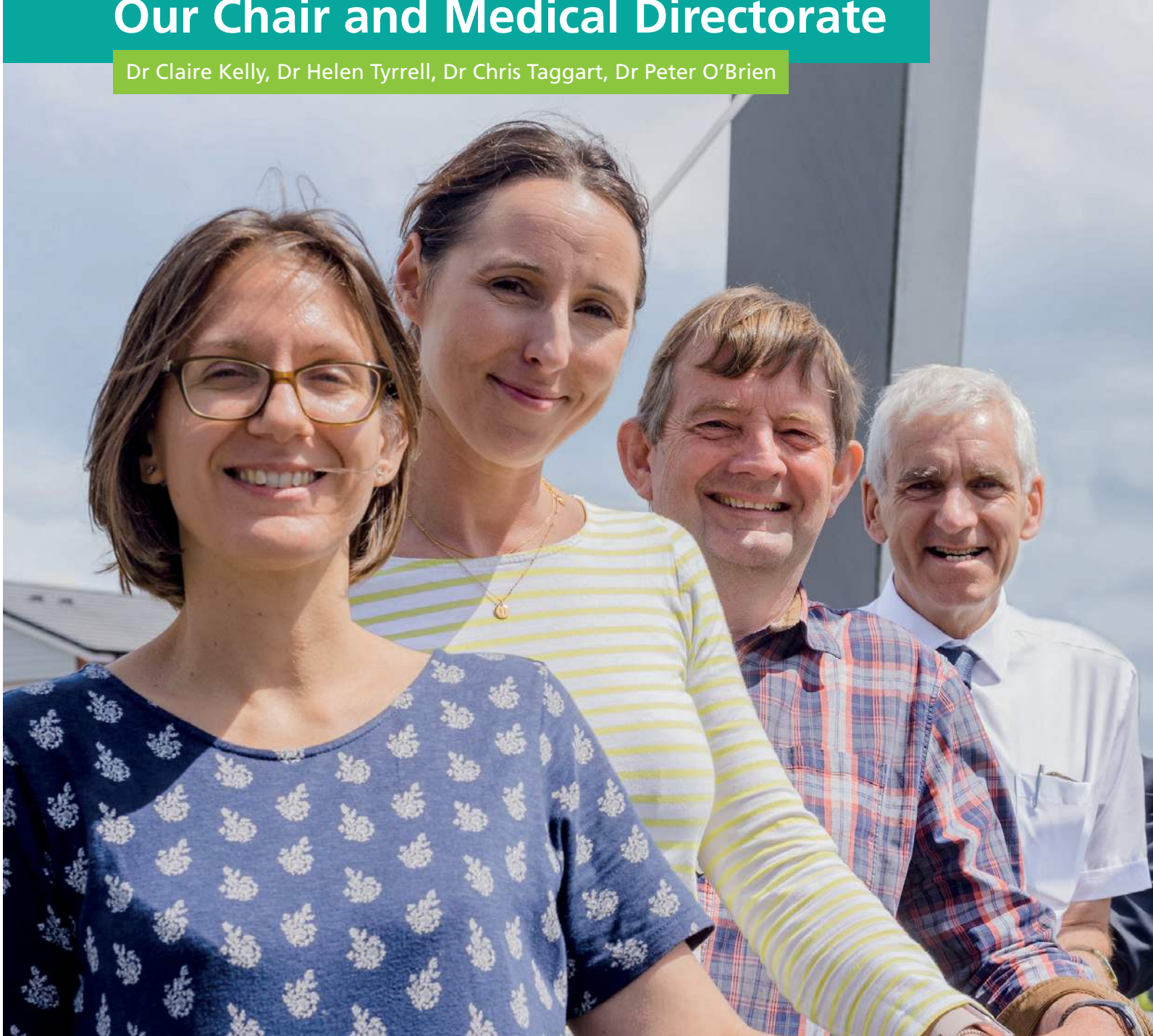
Joanne Shaw
Chief Primary Care
Officer



Lorna Wright
Interim Chief
Finance Officer

Our Chair and Medical Directorate

Dr Claire Kelly, Dr Helen Tyrrell, Dr Chris Taggart, Dr Peter O'Brien





COVENTRY
& RUGBY
GPALLIANCE

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