



Annual

Report 2023

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To Our Stakeholders



Dr Peter O'Brien
Chair

For us at the Alliance, the past year has been about establishing 'the new normal' in two areas. Like everyone else in the world, we have been adjusting to the normalisation of life post pandemic, and like everyone else in the NHS, we have been adjusting to the Clinical Commissioning Groups being replaced by Integrated Care Boards (ICBs).

We at the Alliance continue to run the Respiratory@Home service across the ICB, overseeing and co-ordinating the care of patients with respiratory disease who are not sick enough to need hospital care, but who do need extra monitoring. The way this work is set up - effectively linking primary and secondary care services - is really important to see as NHS leadership and strategy is emphasising that this is a vital development in improving the service that patients get from the NHS.

As you may know, the Covid 'hot clinics' we were providing have been stood down. We did set up clinics at short notice to help respond to the Strep A outbreak in the Winter which became local ARI clinics, but these have now become part of our acute Respiratory@Home service, as have the services which were previously set up specifically for Covid patients.

Across the NHS, there is also a drive to set up multi-disciplinary teams (adding the skills of – for example – Pharmacists, Paramedics and Physiotherapists to the traditional GP surgery teams of Doctors and Nurses). Across Coventry and Rugby, we now have around 260 extra clinicians working in GP surgeries and their Primary Care Networks since the PCN Network DES started. Many of these are recruited, employed by, and supported in their continuing training by the Alliance.

We also continue to run the Paramedic Acute Visiting Service in Coventry and Rugby. This service can respond quickly when GPs need their housebound patients assessing. The close working between Paramedics and GPs supports most of these patients to receive the right care in their own homes. This service is greatly valued by the GPs and greatly appreciated by the patients!

Our ICB covers Coventry and Rugby, plus north and south Warwickshire. To streamline the way that the ICB sets up 'at scale' contracts with primary care, the GP Federations or Alliances from these four locations are working together under the umbrella of Coventry & Warwickshire Integrated Primary Care (IPC), a "Federation of Federations" organisation for Coventry and Warwickshire which is starting to take on contracts that operate across the whole of the local ICB footprint. We anticipate that the ICB will want to award more contracts via the IPC in the future, but it will be in our gift to work with our partners to decide which are best operated at a system-scale level and which will be best run at place level.

During this last year, we said goodbye to our CEO Mel Duffy. Mel had been hugely influential in her time at the Alliance. Her knowledge, her hard work and her vision helped us to develop from a small organisation running one main service to one which was active and successful in many areas.

The organisation she developed, and which is now led so capably by Josie Spencer, can respond quickly to needs in the local NHS, setting up services which help sustain and develop primary care.

We know that we have a lot to offer in the years to come; we continue to be keen to work together with primary care, community care and acute care partners to help plan and deliver the best possible services for our local population.

Peter

About Us

We have much to be proud of at Coventry & Rugby GP Alliance. In a few short years, we have devised and brought to life local frontline NHS services which are:

- Supporting local general practice
- Playing a significant role in keeping people well and out of hospital
- Easing operational pressures by increasing NHS capacity
- Improving local healthcare

This success is based on our mix of knowledge and skills including our clinical expertise, a detailed knowledge of the Coventry and Warwickshire communities we serve, fresh thinking and an ability to turn our ideas into reality.

We are experts in primary care, the community-based NHS services which keep people well and meet their daily health needs. This includes providing thousands of extra GP appointments and targeted support for vulnerable patients in their own homes.

Our vision is to strengthen the NHS, by always being on the S.I.D.E of primary care:

- Supporting - patients, communities, GPs, and the local care system
- Innovating - to better meet the needs of patients and general practice
- Developing - high quality services
- Educating - and training primary care staff, so they have the right skills



Supporting



Innovating



Delivering



Educating

Patient and Stakeholder Feedback

Feedback from our patients helps us to ensure our services provide consistently good care by listening, learning and acting; promoting best practice; and having a culture where they are at the heart of everything that we do.

We are committed to listening to and engaging with our patients, the public and all our key stakeholders to improve our services, even when events haven't gone to plan. We are committed to learning and effecting change. In 2021, we developed an Engagement and Experience framework to embed a consistent approach to engagement and experience with stakeholders by adopting three key principles: Listen, Learn, Act.

Our feedback tells us that:



Over
94%
of patients who provided feedback rated their experience of our services as good or very good.



Over
92%
of our patient feedback has been positive

We regularly liaise with our stakeholders to ensure that their feedback is reviewed and responded to, and take all other provider feedback into account when considering the safety and quality of the services we provide.

Our second set of Quality Accounts will be published this year, allowing us to review the priorities we identified for 2022/23, to measure our success and achievements, and set our 2023/24 priorities with a continued focus on empowering patients to have a voice, and working with us to co-produce our services.



Our Work Programme – 2022/23

Our Annual Report gives us the opportunity to look back over the last year, and gives us the chance to look forward and set out our priorities and aspirations for 2023-2024.

This last year has been a busy and challenging time, with some uncertainty due to wider system changes and across the NHS. Throughout all this, our staff continue to make us proud with their 'can do' approaches and relentless work ethic to provide safe patient care.

Primary Care Networks – or PCNs – continue to develop and are taking a proactive approach to managing population health and assessing the needs of their local population, identifying people who would benefit from targeted support. CRGPA continues to work with and alongside our PCN partners, delivering core infrastructure for some and providing services for others. This type of flexibility and “can do” approach is something we believe assists local primary care to meet the challenges of the future.

Primary Care Surge Service

Primary Care Surge continues to provide additional capacity to practices across Coventry and Warwickshire in times of need. In 2022-2023, we provided an additional 41,000 patient consultations across the system.

Continuous feedback remains very positive with Practices feeling the benefit of the support offered and capacity provided.

“ Always delighted with the service we receive from surge ”

“ GP Surge has been a fantastic benefit to our Practice especially when we have required additional GP support to help our patients ”

Respiratory@Home / nMABs (neutralising monoclonal antibodies or antivirals)

Since December 2021, We have clinically triaged and helped vulnerable patients to access anti-viral treatments, both orally and via infusions (i.e. neutralising monoclonal antibodies or 'nMABs'). As testing for Covid reduced and we transitioned into a steadier state, we have continued to focus on helping the most vulnerable to support and access their healthcare needs, ensuring they are met.





Annual Health Checks

Our much valued SMI Healthcare Team continue to support both patients and General Practice by ensuring that some of the most vulnerable people at risk of long-term needs are provided with the access to a full physical health check, to improve their health outcomes and provide valuable information about diet, health, exercise, and signposting them for more support.

With the service and its team receiving 100% positive patient feedback, we work tirelessly to continuously improve and make changes that matter to our patients.

“ Overall the appointment exceeded my expectations. Thank you very much! ”

“ Very helpful and informative with great healthy lifestyle information. ”

“ Both people in the room were lovely, kind, sensitive and knowledgeable. I'm really grateful for their time and effort. ”

Paramedic Acute Visiting Service

Our Paramedic Acute Visiting Service has been operating in Coventry and Rugby for over 4 years, with Paramedics working closely with General Practice to provide same day home visiting support with the specific objective of avoiding unnecessary hospital admissions by providing a responsive service to patients on behalf of GPs.

Having embedded the service into general practice, in 2022. We worked closely with community providers, providing capacity for urgent community response, which is part of the NHS Long Term Plan.



Admiral Nurse Service

The service provides regular contact and direction over an average of 12 weeks, ensuring information is provided to families and carers to support improvements in everyday management of loved ones' dementia. The service gives regular contact and direction over an average of a 12-week period ensuring that information is provided to support improvements for everyday managing.

The service is available in Coventry, Rugby and Warwickshire North, with a dedicated support line number available between Monday to Friday.



Primary Care Network Business Support Unit

The PCN BSU is now in its third year of service provision and is continuing to develop and grow.

“The support I have received from Natalie as our PCN Operations Manager has been invaluable; it has saved me hours of time and work! I have built up a great working relationship with Natalie, who provides me with the information and localised actions that I can immediately implement across my practice. Amazing partnership working and service!”

We now have five Primary Care Networks making use of our Platinum Service offer, with a further 3 PCNs utilising our Additional Roles service.

We are particularly proud of how our ARRS service has developed over the past 3 years - we now have a full service for the following roles:

- Clinical Pharmacists
- Pharmacy Technicians
- Physician Associates
- Social Prescribing Link Workers
- Care Coordinators
- Paramedics

Each of these roles has a dedicated, experienced Lead in place to ensure safety, governance, and compliance for both our staff working in the PCNs, and the PCNs that support them.

In addition to these roles, we also employ Trainee Nursing Associates and Nursing Associates. We have recently appointed a Health & Wellbeing Lead, and will be growing our provision of those roles too. We have also successfully worked with other providers to fill ARRS roles for PCNs – including OTs, Dieticians, FCPs, and Health & Wellbeing Coaches.

We currently employ around 90 additional roles staff, with an expectation that we will reach around 100 by the end of this financial year.

For those PCNs that take our Platinum package, we also offer full financial, HR, and PCN Co-ordination support which saves the PCNs from having to employ these roles in-house.

As the initial PCN DES comes to an end in March 2024, we will be looking to adapt our PCN support offer to ensure that it remains current and relative to any changes and updates to the DES.



Alliance Teaching Practice

We are now in our third year of running the contract for the ATP Practice, and it continues to be a steep and challenging learning curve for us.

We are finally in a position where we are nearly at a full complement of GP staff. However, our Nursing Team remains short, and we are working hard to address that and to build up a full team. We have recruited well to our admin teams, but the nature of the role means that it seems to be a never-ending challenge to remain with full numbers.

A real positive for us this year has been joining Skyward PCN in April 2023 and appointing a Clinical Director from our own Practice. The PCN has also benefitted from the support received from the Platinum package offered by the Alliance's PCN BSU. We almost have a full complement of ARRS staff which has hugely benefited the ATP and other Practices in the PCN.

Having appointed Emma Page as our Practice Manager this year, we have a new Associate Medical Director, Dr Raymond Ladele, and both are working closely to further embed a culture of continuous improvement and innovation. There has been a huge learning curve for them given the level of challenge and scrutiny we at the Alliance receive on contract performance and management, but our financial year-end position has been the best achieved so far in the contract.



We still have an ambition to become a Teaching practice, and our new Associate Medical Director is leading the charge with this, and we are already in discussions with the GP School on our future plans.

We look forward to another year of development and growth for the ATP.

The Year Ahead

We will continue to work closely both with local General Practice, local Federations and at scale primary care organisations.

We have gone from strength to strength through the jointly established Coventry & Warwickshire Integrated Primary Care – a company to help support a “Federation of Federations” collaboration. With the transition to the new Coventry & Warwickshire ICB, much of our services from 2021/22 were carried forward into 2022/23 except for Extended Access – as the contract came to an end nationally and was replaced by the Enhanced Access service.

It is widely recognised that general practice continues to face sustained and significant pressure – but despite the huge challenges, more appointments, and innovative ways of providing care continue to be delivered. 2023/24 will see the final year of the PCN DES 5-year framework agreement (Investment & Evolution) and work will take place nationally to engage and build on the Fuller stocktake report – a report that sets out what the future of “integrated” primary care could look like. We will seek out opportunities to develop and grow our services to support the upcoming challenges within local primary care.

Our key areas of work will focus on:

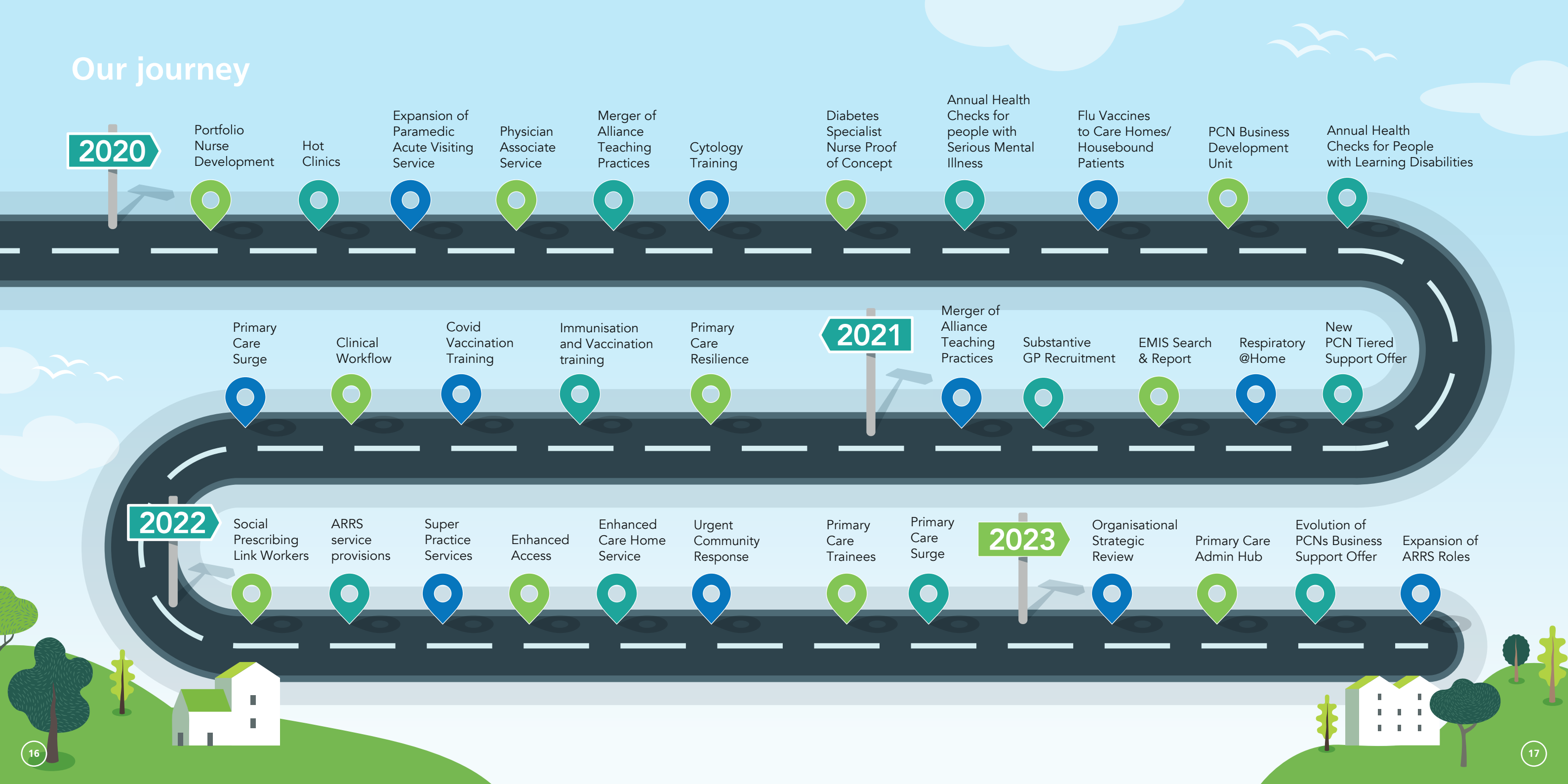
- Supporting local general practice – this has always been at the heart of why we exist but now more than ever, our member practices have reminded us they need our support.
- Challenges have remained around workforce across general practice. We are committed to looking for solutions to support individuals and the wider health system.
- It's important that we deliver our existing contracts to and beyond contractual requirements to remain credible as trusted providers and to support the ongoing sustainability of the organisation.

The last year has been a transitional year with new staff and teams in place. The organisation has invested in its support ensuring we provide a steady base from which to grow. This year will be a springboard for working on new services while continuing to horizon scan for new opportunities either through new innovations or new contracts (e.g., GP Out of Hours, Out of Hospital services) – either on our own or through partnership working with others.

At the Alliance, we will continue to be here to **Support, Innovate, Deliver and Educate.**



Our journey



Showcasing Admiral Nurses

Our Admiral Nurse Service has been established for over 4 years.

Providing carer support to those at their most challenged and vulnerable time, when caring for a loved one with Dementia, carers can feel challenged and in need of guidance and signposting to not only what they are entitled to, but what they need.

The service gives regular contact and direction over an average of a 12-week period ensuring that information is provided to ensure improvements in everyday methods for coping and managing loved ones with complex needs. The team can also signpost and support with referrals for people with complex needs to other providers. Complex needs can include:

- A person with dementia who has been admitted to hospital at least twice in the last six months
- The person with dementia is at high risk of going into hospital because of their dementia
- The carer is struggling to understand the diagnosis of dementia and how it affects the person
- The carer is under significant stress and at risk of a breakdown

- The carer needs support with managing challenging behaviour
- The family needs support with advance care planning
- If there are disagreements between the person with dementia and the carer about treatment and care.
- And if the person with dementia is nearing end of life

Support for Coventry, Rugby and Warwickshire North is available. Direct contact with the Team is available via a dedicated support line number between Monday to Friday 09.00 – 13.00.



Key achievements this year

The real focus for the Team this year has been working to integrate into the wider system, through collaboration with PCNs, attendance at system level training events and ensuring links are cemented between social and continuing care, whilst still providing the directed and required support not only to carers but also the person with dementia. Improvements in reporting and access to patient and carer information has enabled improved communication channels to all involved in the care pathway. An increase in referrals has been achieved through promotion and communication, and working with focus groups, whilst maintaining support for carer events and newly focussed dementia cafés and hubs in the localities.

Focus for next year

Our focus is continued growth and support, whilst working with partners on a systemwide model to reduce variations in access and support in localities.



Respiratory@Home / nMABs

Since December 2021, we have supported clinically vulnerable patients with Covid to access anti-viral treatments - both orally and via infusion (neutralising monoclonal antibodies).

We have continued to support Covid-positive patients accessing anti-viral treatments. Even as testing has reduced and we return to a steadier state, we still have the most vulnerable needing support and assessment to ensure their healthcare needs are met.

Since its inception, the service has been expanded to include remote monitoring of respiratory patients for those with an exacerbation of an underlying respiratory concern, or an acute need requiring observation, but not direct intervention. The team now faces its newest challenge of becoming the hub for Primary care, with clinicians being responsible for prescribing anti-viral treatment across the system footprint.

Key achievements this year

We have continued to support both patients and the wider health system by reducing pressure on partners including General Practice and acute Trusts by maintaining a 7-day, 12- hour service supporting with respiratory monitoring, support, advice, and clinical assessment

Focus for next year

To continue to develop and grow the overall support offer to Primary Care and Pharmacy services, ensuring information sharing, and collaborative working.



Financial

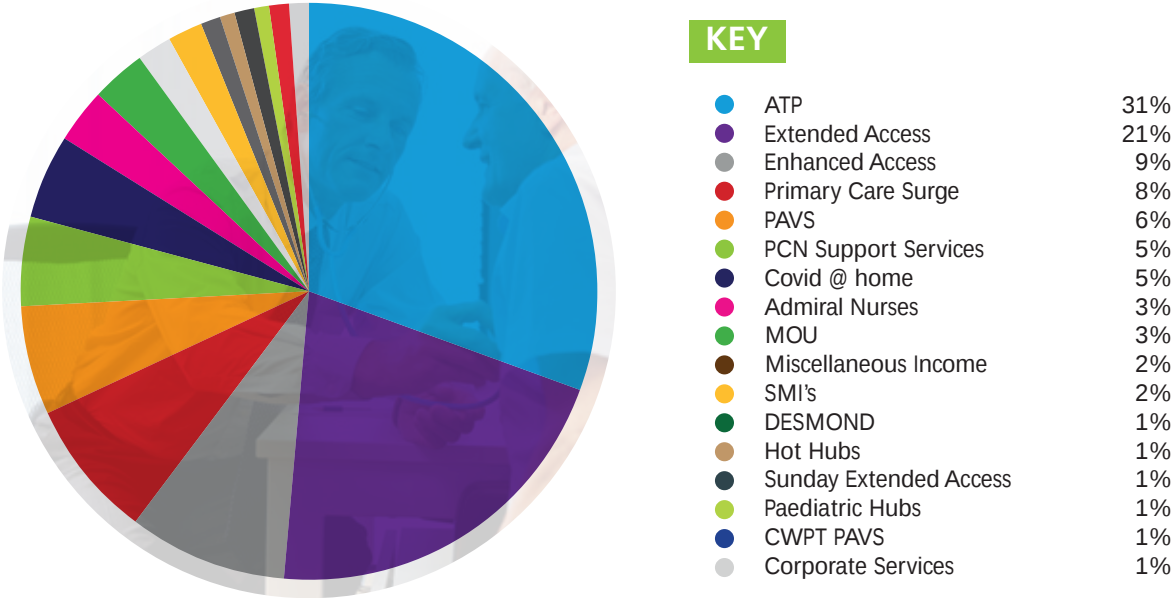
Our Income

The Alliance received income totalling £9.15m in 2022/23 compared to income of £9.5m* in 2021/22, a decrease of 4%. This has predominately resulted from the transition of the Extended Access service to the Enhanced Access service during the year.

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

Service	Source	Income
		000s
ATP	Coventry & Warwickshire ICB / PHSE	2,866
Extended Access	Coventry & Warwickshire ICB	1,904
Enhanced Access	PCN's	789
Primary Care Surge	Coventry & Warwickshire ICB	761
PAVS	Coventry & Warwickshire ICB	525
PCN Support Services	PCN's	453
Covid @ home	Coventry & Warwickshire ICB	419
Admiral Nurses	Coventry & Warwickshire ICB	319
MOU	Coventry & Warwickshire ICB	250
Miscellaneous Income	Various	204
SMI's	Coventry & Warwickshire ICB	186
DESMOND	Coventry & Warwickshire ICB	93
Hot Hubs	Coventry & Warwickshire ICB	86
Sunday Extended Access	Coventry & Warwickshire ICB	85
Paediatric Huvs	Coventry & Warwickshire ICB	75
CWPT PAVS	CWPT	72
Corporate Services	Various	59
Total		9,148

* Prior year financial accounts have been adjusted from a previously reported income of £11.4m as a result of a review of the accounting treatment for ARRS staff recharges. There is no impact on profit, tax or shareholder's funds as previously stated.



During 2022/23, the Alliance had to address the financial impact of the expiration of the Extended Access service. Although the company had been preparing for this scenario over a number of prior years, diligent financial control and planning has been crucial to ensure the company remains sustainable through the period of transition. New income streams have been sought, in particular the Enhanced Access service which combined with building on existing portfolios has enabled the Alliance to navigate its way through this period.

Key areas of service delivery include:

ATPs

Income from the 4 practices in 2022/23 totalled £2.866m, an increase of 12% from the previous year. This increase mainly resulted from an increase in population to 22,213 as at 31 March 2023. Costs marginally outweighed the income as a result of locum costs to combat staffing challenges, and we plan to recover the deficits incurred to date over the remainder of the contract term.

Enhanced Access

This service was set up in October 2022 in accordance with the changes in the Network Contract DES, and services are being delivered on behalf of six PCNs across the Coventry & Warwickshire region. Income for the first six months of operation amounted to £789,000.

Primary Care Surge

2022/23 was the first full financial year for this contract, and the service secured income of £761,000 which is an increase of 200% when compared to the previous year.

Respiratory@Home

An increase in the service delivery performance resulted in a 42% increase in income for 2022/23, and income increased from £369,000 to £525,000.

Financial continued

Our Spending

The Alliance's spending amounted to £8.988m in 2022/23, compared to £9.48m in 2021/22. Pay related costs accounted for 83% of the total expenditure (84% in 2021/22) with the remaining 17% relating to premises and general overhead expenses. A breakdown of our spending is shown below:

Service			Expenditure 2022/23	
Pay Costs			000s	000s
Clinical & Support Service Staff			3,996	
Non-salaried GPs			2,361	
Corporate Staff			926	
Directors			142	7,425
Establishment Costs				
Electric Wharf			84	
ATP Rent & Service Charges			543	627
General Administrative Expenses				
IT equipment, software & support			283	
Stationery & Postage			40	
Legal Fees			13	
Professional services			134	
Insurance			104	
Medical Consumables			179	
Accountancy			23	
Practice Charge			82	
Other Miscellaneous			79	937
Total				8,988

2022/23 Annual Accounts

The annual accounts for the year 2022/23 have been prepared by Ballards LLP and show a reported surplus before tax of £160,209. Corporation Tax to the value of £29,850 is payable resulting in a post-tax surplus for the year of £130,359, compared to a post-tax surplus of £40,238 in 2021/22.

At the end of 2022/23, the Alliance had retained earnings of £861,383 representing the accumulated net surpluses since its incorporation.

Contingent Liabilities

As at the end of 2022/23, the Alliance is not aware of any potential liabilities which may crystallise in the 2023/24 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	Start Date	End Date
		£	£	£		
P O'Brien	Chair	49,037.94	5,802.98	-	01/02/2019	
I Taylor	Practice Director	15,979.96	999.66	1,686.78	01/11/2019	
AD Dabas	Practice Director	15,636.60	949.77	2,248.56	01/11/2021	
S Allen ¹	Practice Director	-	-	-	01/11/2021	24/10/2022
J Krishnarajapuram ²	Practice Director	5,863.72	343.45	843.20	16/11/2022	
EA Kelly	Non-Executive Director	13,685.04	666.21		01/03/2017	
P Elkin	Non-Executive Director	13,685.04	666.21		01/08/2017	
P Marson	Non-Executive Director	13,685.04	666.21		01/03/2021	
Total		127,573.34	10,094.49	4,778.54		

Notes

- ¹ Dr Steve Allen resigned from the role of Director on 24 October 2022
² Dr Jamuna Krishnarajapuram's Director role commenced on 16 November 2022

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.

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.

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 bi-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.

Financial Assurance

At the Board's request, Ballards LLP have undertaken an 'assurance' review of the company's financial statements in accordance with Section 1A of FRS 102 (Financial Reporting Standards). This review primarily consists of performing detailed audit procedures on the Balance Sheet, walk through tests, performing analytical procedures and evaluating supporting documents 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 2023, and of its profit for the year then ended;
- In accordance with the relevant accounting standards; and
- In accordance with the requirements of the Companies Act 2006.

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



Jamuna Krishnarajapuram
Associate Practice Director



Dr. Ian Taylor
Practice Director & Speak Up Guardian



Dr Arun Dabas
Practice Director



Dr Claire Kelly
Associate Medical Director



Dr Helen Tyrrell
Medical Director



Pat Marson
Non-Executive Director



Paul Elkin
Non-Executive Director



Eamonn Kelly
Non-Executive Director



Josie Spencer
Interim Chief Executive Officer



Sarah Weir-Smith
Chief Nursing and Clinical Operations Officer



Daljit Sandhu
Chief Strategy, Planning & Performance Officer/ Deputy CEO



Joanne Shaw
Chief Primary Care Officer

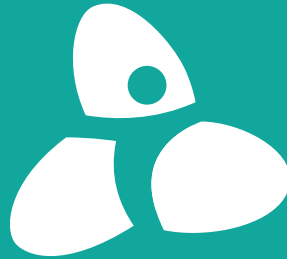


Stephen McCabe
Chief Finance Officer

Our Chair and Medical Directorate

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





COVENTRY
& RUGBY
GPALLIANCE

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