

Annual

Report 2022



COVENTRY
& RUGBY
GP ALLIANCE



coventryrugbygpalliance.nhs.uk

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To Our Stakeholders



Dr Peter O'Brien
Chair

The two main themes over the past year have been starting to come to terms with Covid and looking ahead to the changes that the current NHS reorganisation will bring.

Initially, our main role in the Covid pandemic was to provide Hot Hubs, where primary care patients who may be carrying the infection could be seen in a separate clinic with strict infection control measures. Later on, we were commissioned to run a Respiratory@Home service, whereby patients who are unwell, but not severe enough to need hospitalisation, are monitored at home. Patients can send their oxygen levels, pulse and temperature to us by text or our staff can contact them by phone each day to ask how they are and collect these over the phone.

Last December, this service was further expanded. A neutralising Monoclonal Antibodies (nMabs) medication had been developed for high-risk patients which lessens the chance of severe illness for high-risk patients with Covid. The medication needs to be given in hospital by intravenous infusion or oral prescription. Our Service Centre supports the system by contacting patients and booking them into an appointment with a Clinician to identify their eligibility for referral to the acute setting for

consideration of treatment. Where appropriate, we arrange for patient to be seen in their local Covid Medical Decisions Unit, and for the patient to be followed up after their discharge by our Respiratory@Home service.

As levels of Covid rose in January and February 2022, this service became really busy - providing a crucial service to hundreds of patients. The key to all this was having good communication between our service, the laboratories, and the hospital staff, underpinned by using the available IT to great effect.

Along with other Federations within our health system, we also set up a service, Primary Care Surge Centre, to help GP surgeries when they suddenly found themselves short of doctors. We provide a team of GPs doing surgeries by telephone, linking into the practices' own computer system. Being able to work from the patients' GP records, and being able to issue prescriptions, blood test forms and sick notes, has meant that the service we offer to practices is extremely useful at a time when they

Continued overleaf...

really need support.

The Paramedic Acute Visiting Service (PAVS), has been in place throughout the Covid pandemic, providing a rapid assessment and treatment for patients in their own home, resulting in a speedy hospital admission for a small proportion of them, but fortunately able to keep the large majority at home, with ongoing support from their GPs.

We continue to look out for ways in which we can support general practice to look after their patients, linking in with other parts of the health service or working alongside 'Alternative Roles'. Primary Care Networks, groups of GP practices working together, now have NHS funding to take on staff such as Clinical Pharmacists, Physicians Associates, and Social Prescribers. We are taking a significant role in recruiting these staff members, overseeing their training and helping the Networks to integrate their work with that already being done by Practices. Increasingly patients are starting to value the skills that these new roles offer them, and Practices see them as helping with primary care's increasing workload.

To set up and run these services, we have been

fortunate at the GP Alliance to have a combination of good medical advice, working closely with a very capable administrative team. In particular we have had excellent leadership from our Chief Executive, Mel Duffy, who joined us in 2018.

Mel has decided to move to new roles this year, but she has left us with a strong base to negotiate the many changes coming to the way the NHS operates. In July 2022, Clinical Commissioning Groups will be replaced by Integrated Care Boards. Our GP Alliance continues to work alongside partner GP Federation organisations in Warwickshire, to continue to work collaboratively on services across the whole of Coventry and Warwickshire.

We are confident that we will be able to develop new services for patients served by the Integrated Care System, while continuing to support the Primary Care Networks and GP practices. We will continue in our objective of "Strengthening primary care for a stronger NHS".

Peter



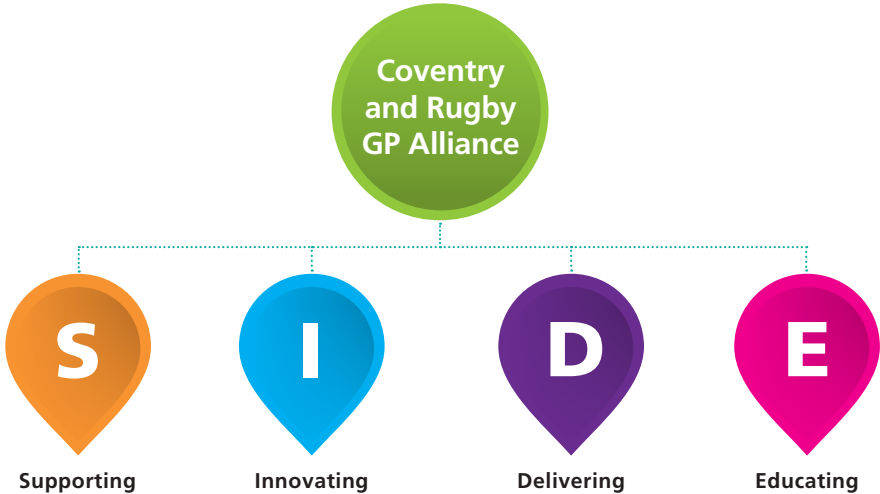
About Us

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 -** providing education and training opportunities to ensure primary care has the right workforce with the right skills



Patient and Stakeholder Feedback

Patients are at the heart of everything that we do, and we are committed to listening to and engaging with our patients, the public and all our key stakeholders to improve our services.

In 2021, we developed an Engagement & Experience framework to embed a consistent, organisation wide approach to engagement and experience by adopting three key principles: Listen, Learn, Act. As part of this, we developed a range of feedback channels for patients to share their views across all our services, including our Alliance Teaching Practice. We have had over 4,000 responses since June 2021.

Our feedback tells us that:



Over
86%
of patients rated
their experience of
our services as good
or very good.



Over
80%
of our patient
feedback has
been positive

As an organisation, we recognise the importance of working with partners such as Healthwatch to refresh and embed the principles of meaningful patient engagement and involvement. We regularly review recommendations made by Healthwatch to primary care and develop action plans to address them, such as patients experience of practice telephony.

We have published our first Quality Accounts, setting out our priorities for 2022/23 with a focus on empowering patients to have a voice, and to work with us on the co-production of our services. We know there are currently voices which we do not hear, so we are working in partnership with Coventry University to reach those who are seldom heard.



Our work Programme for 2021/22

Our Annual Report gives us the opportunity to look back over the previous year April 2021 to April 2022 - and also gives us the chance to look forward and set out our priorities and aspirations for 2022 to 2023.

The previous year has been a busy and challenging time, not only for CRGPA but across the NHS as a whole. We are very proud of how staff have worked relentlessly to provide safe patient care despite the extreme demands on services arising from the ongoing pandemic. Across the system, we should all be very proud of our staff and of the way in which teams have and continue to pull together, often across organisational boundaries, to effectively manage these pressures in the very best interests of patient care.

During this year, there have been some changes to our Board of Directors. In 2021, we held a Practice Director election to replace two of our Practice Directors, Dr Hardev Singh who had ended his term and Dr Prab Sekhon who stood down; with Practice Directors Dr Steve Allen and Dr Arun Dabas joining us in the Autumn of 2021. During this time, our system along with the rest of England continued to develop and, although the transition to the new NHS landscape of Integrated Care Systems was delayed from April 2022 to 1st July 2022, by the time this report is published, the Coventry & Warwickshire Integrated Care Board will be in place as a statutory body. This presents both opportunity and some uncertainty not only for the Alliance, but all system partners.

Primary Care Networks continue to develop and are taking a proactive approach to managing population health and assessing the needs of their local population to identify 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 will assist local primary care to meet the challenges of the future. The Fuller Stocktake report published in May 2022 looks at best practice in primary care and encourages us all to see if we can replicate that best practice in our system. It also highlights the challenges of workforce fatigue, and the workforce pressures we all face. It is only by coming together and working in partnership we will be able to address these issues.

Primary Care Surge Centre

As we recovered from the pandemic, GP practices saw an increase in requests for appointments during 2021. But with Covid infections affecting their workforce, coupled with the roll out of the Covid vaccination programme, some practices found themselves struggling to meet patient demand. Developed in partnership by all Federations across Coventry, Rugby and Warwickshire, the Primary Care Surge Centre provides Practices experiencing urgent and emergency issues with their GP workforce with a remote GP led session providing up to 20 appointments for local patients.

The service has been available to all practices across Coventry and Warwickshire to provide extra capacity in their time of need, with 17,000 additional appointments provided to date.

The feedback on the service has been very positive with practices in particular feeling the benefit of the support offered.

“

The Alliance is in the corner of General Practice with this service.”

GP

“

Everything was done quickly and professionally very good service would be pleased to be treated this way again.”

Patient



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

In December 2020, in partnership with other Federation organisations in the local health system, we mobilised the Respiratory@Home Service. The service was developed with a lot of hard work and dedication from the staff members involved, and very quickly became a successful service that was able to support patients through an anxious time. In December 2021, we were asked to support the clinical triage of vulnerable patients to support them to access anti-viral treatments called nMabs. Commissioners needed us to do this very quickly, and just as we had done the previous year, we worked at pace with our partners – including local Covid Medicines Delivery Units (CMDUs) in acute hospitals - to promptly start supporting patients to access this incredibly important treatment.

Annual Health Checks

People living with Severe Mental Illness (SMI) face one of the greatest health inequality gaps in England. The life expectancy for people with SMI is 15–20 years lower than the general population, and this disparity in health outcomes is partly due to physical health needs being overlooked. Individuals living with SMI are not consistently being offered appropriate or timely physical health assessments despite their higher risk of poor physical health. They are not being supported to use available health information and advice or to take up tests and interventions that reduce the risk of preventable health conditions.

Healthcare Assistants employed by CRGPA deliver annual health checks for people with Severe Mental Illness for Coventry and Warwickshire. They take a health coaching approach to encourage behaviour change and take-up of follow up and lifestyle interventions. In developing and delivering our service, we've listened to our experts by experience as well as clinicians to make improvements, noting that some things work well, some don't and responding appropriately when something isn't working to make the 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

Originally launched in June 2019, our Paramedic Acute Visiting Service, (PAVS) was established initially to see and treat patients aged over 65 years at home where appropriate, with a specific objective of avoiding unnecessary hospital admissions by providing a responsive service to patients on behalf of GPs.

The service has evolved, with practices now able to directly book patients via EMIS Remote Consultation; and Paramedics able to write-back directly into the patient's medical record, utilise practice templates and task functionality, thus embedding the service into general practice. Further developments include partnership working with community providers, providing capacity for Coventry's Urgent Community Response service, which is part of the NHS Long Term Plan.



“ Very friendly and made my 86 year old nan feel at ease. He had time for any questions and nothing felt rushed. ”

“ Person who visited was caring and compassionate and he explained everything really well. Brilliant service! Thankyou for keeping me out of hospital with your clinical oversight! ”

“ Very supportive and actually asked my husband directly which is excellent as he has dementia and often people just ask me. She was really kind to him and thorough in her examination. ”

“ It is probably not exaggerating to say he probably saved her life. ”



Primary Care Network Business Support Unit

Since its successful launch in Autumn 2020, our PCN Business Support Unit (BSU) has continued to evolve to support local Networks.

We welcomed two additional PCNs to our Platinum service offer this year, with all five in total benefitting from:

- **Finance package** – holding a bank account, managing all income and expenditure, payment of invoices, monthly finance statements, management of different funding streams, support with procurement;
- **HR package** – full recruitment process through to employment and ongoing HR support once in post;
- **PCN co-ordination** – overall support for the PCN including with meetings, EMIS, reporting, IIF, ARRS i.e. anything to do with Network DES;
- **ARRS service** – employment and provision of Clinical Pharmacists, Physicians Associates, Social Prescribing Link Workers and Paramedics, providing a workforce of over 60 staff members to PCNs in Coventry and Rugby; and
- **Liaison with other ARRS employers** – working successfully with other providers to fill ARRS roles for PCNs – OTs, Dieticians, FCPs, Pharmacy Technicians, Health & Wellbeing Coaches.

As our unit continues to expand, we are now focussing on:

- An analytics offer to support PCNs to maximise income from IIF and understand areas of focus for new investment;
- Adding new ARRS roles – Paramedics, Care Co-ordinators, Health and Wellbeing Coaches;
- Estates planning and support;
- Potential centralisation of some back-office functions;
- Offering Platinum package to other PCNs; and
- New services to align with DES specification

Alliance Teaching Practice

When we took over the 4 APMS practices in Coventry on 1st July 2020, we expected to have to work hard to get the practices working together. What we did not anticipate was how doing this during Covid times made everything so much more difficult, and progress so much slower than we ever expected.

We have gradually recruited staff to add to those who transferred over from the previous providers. We have recruited well to our clinical and administrative teams, but the demands on primary care seem to be more than ever before. We have taken on Clinical Pharmacists from the Additional Roles Reimbursement Scheme, as well as having support from Social Prescribers and Care Co-Ordinators. These additional staff members help us provide services to a higher quality, but there is still plenty of work for everyone!



We are now two years into our contract and want to refresh our original goal of setting up the practices to be teaching practices. From the start we have been doing a lot of medical student teaching, but we want to extend our role to offer training for receptionists, for administrative staff, nurses, managers and for junior doctors.

We believe that the more training we provide, the better it will be for primary care in the city and the better it will be for the standard of care we provide within the practices.



The Year Ahead

Last year we outlined our achievements and key areas of work going forward.

In many ways, this year is a continuation of that so certain elements remain unchanged. We will use this year to continue to build on our achievements of 2021/22 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 continue to 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.
- Expanding the Teaching element of our Alliance Teaching Practice to develop more roles across primary care and develop services and initiatives for them to benefit local practices.
- We will continue to expand our offer of ARRS roles to PCNs including Social Prescribing Link Workers and Health & Well-Being Coaches.
- 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. 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 Place and System level support. In the year ahead our collective role will never have been more important as general practice and systems work to fully restore and recover services to meet the increased demands of our population.

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



Our journey





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 PCN Network Contract DES, which results in duplication and increased infrastructure costs.

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

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

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 with Myton Hospice to support patients and carers to provide care and support for carers of palliative patients and their families.
- We are working with the City Council and other local service providers as part of the National Wave 3 Population Health Management scheme to set up a scheme that focuses on patients with lower back pain and repeated opioid prescribing to improve their wellbeing by supporting them to return to work. This has also resulted in fewer GP appointments being needed.
- We have recruited an Occupational Therapist who helps deliver dementia reviews and other patient services at a local level.
- We have focussed our efforts to deliver the targets set out in the Investment and Impact Fund, e.g., our Clinical Pharmacists are provided with dedicated sessions to meet and collaboratively work on achieving indicators and supporting patients in areas such as medication reviews.

- Our Social Prescribers have made a huge difference to our patients and we look forward to adding more to the team.
- We have appointed a dedicated role to deliver care to our patients with Learning Disabilities to improve their health and wellbeing.
- Our staff have worked exceptionally hard to deliver the covid vaccination programme and we thank them for their hard work and dedication.

Focus for next year

- Successful roll out of Enhanced Access.
- Recruitment of new roles including;
 - Trainee Nurse Associates
 - Care Coordinator
 - PCN Paramedics
- Continuing to work together as a cohesive PCN to deliver against the IIF and embedding consistent clinical supervision programmes for new roles.



Clinical Director for Central,
Dr Manjari Bollu

Showcasing our Platinum Offer PCNs

Go West Primary Care Network 45,564 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 with Myton Hospice to support patients and carers to provide care and support for carers of palliative patients and their families.
- Our Social Prescribers have made a huge difference to our patients and we look forward to adding more to the team.
- We have recruited a fantastic Paramedic who undertakes care home visits and supports our frail patients.

Focus for next year

- Successful roll out of Enhanced Access.
- Recruitment of new roles including;
 - Trainee Nurse Associates
 - Occupational Therapist
 - We are looking to add a clinical pharmacist to our Care Home Frailty Team.
- Collaborative working to ensure the best possible achievement of the new IIF Indicators.



Clinical Director for Go West,
Dr Eve Pollard

Unity Primary Care Network 66,056 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

- We celebrated the successful delivery of our Heart Failure project which increased awareness and clinical knowledge among GPs and CPs. Increased prevalence, which has resulted in patients being put on a recall system and will have a formal HF review invitation each year, with appropriate monitoring.
- In partnership with University Hospital Coventry and Warwickshire, we recruited Coventry's first primary care Pharmacy Technician.
- We also recruited a Dietician and Occupational Therapist to provide care and support to our patients.
- Appointing our Mental Health Liaison worker to support our student population with their mental health.
- Working with Myton Hospice to support patients and carers to provide care and support for carers of palliative patients and their families.

Focus for next year

- Recruitment of x 3 Care coordinators to support patients and other ARRS roles.
- Continue working together to ensure the best possible achievement of the new IIF Indicators and improve outcomes for patients.
- Successful roll out of Enhanced Access.
- Delivery of PMS Schemes- Mental Health Champion and Cancer Care Champion etc.
- Continue to develop our workforce and their clinical skills through supervision and training.



Clinical Director for CW Unity,
Dr Tejinder Lyall

Showcasing our Platinum Offer PCNs

Skyward Primary Care Network



Skyward is a newly formed PCN.

Practices in the PCN

- Edgwick Medical Centre
- Holbrooks Health Team
- St Georges Road Surgery
- The Cheylesmore Surgery

Key achievements this year

- Coming together to establish a new Primary Care Network.
- Appointing Dr Manjit Jaspal as our first Clinical Director.
- Welcoming our first ARRS roles, including Paramedics, Clinical Pharmacists and Social Prescribing Link Workers.
- Working with the CRGPA Business Support Unit as a Platinum PCN.

Focus for next year

- Successful roll out of Enhanced Access.
- Expanding the ARRS roles available to our patients (e.g. an additional Paramedic, Clinical Pharmacists and Physician Associate).
- Collaborative working to ensure the best possible achievement of the new IIF Indicators.

GP Connect Primary Care Network



Practices in the PCN

- Central Medical Centre
- Dr Princewill and Partners
- George Eliot Medical Centre
- Park House Surgery
- Phoenix Family Care
- Stoke Aldermoor Medical Centre
- Windmill Surgery
- Woodway Medical Centre

Key achievements this year

- Current ARRS workforce:
 - 10 x Clinical Pharmacist
 - 2x First Contact Physiotherapy
 - 2x Physician Associate
 - 2x Social Prescribing Link Worker
 - 1x Care Coordinator
 - 1x Well Being Coach
- Working with District Nurses associated to each Practice for GP Connect and MDT grp meetings arranged for shared learning and action plans with social prescribers and clinicians.
- Shared drive for PCN with recorded training seminars and GP Connect pathways; Blue Stream for PCN; Practice Policies.
- CQC PCN support - setting up a standardised approach across the PCN.
- Working on Carers support - aiming GOLD standard for all practices with incorporation of social prescribers and CP and PA.

- Population Health - Frailty Register created with secondary care - all 345 housebound patients reviewed by ANP.
- Heart failure audit for all Practices.
- Working on CVD prevention and diagnosis - working to identifying inequality in health care and targeting pts identified.
- Completed Heart failure audit for all Practices.
- Covid vaccinations phase 3 complete.
- Housebound Flu completed by PCN staff.
- IIF achievements Dashboard -achieved all targets 2021.
- Cancer cytology PCN average 81%.
- Completed Audit Cancer Diagnosis in 12 months improving coding and cancer care.

Focus for next year

- Delivery of Enhanced Access
- Developing an MDT approach for mental health integrating with voluntary sectors /community teams.
- Collaborative working with community teams and ARRS role.
- Recruitment of social prescribing link workers and working to support families and patients in need.
- Working towards Health promotion and self care.

Financial

Our Income

The Alliance received income totalling £11.4m in 2021/22 compared to income of £9.0m in 2020/21, an increase of 26%.

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

Service	Source	Income
		000s
Extended Access	Coventry & Warwickshire CCG	3,243
ATPs	Coventry & Warwickshire CCG/ PHSE	2,553
PCN Support Services	PCNs	2,199
Miscellaneous Income	Various	781
Hot Hubs	Coventry & Warwickshire CCG	674
Covid @ home	Coventry & Warwickshire CCG	417
PAVS	Coventry & Warwickshire CCG	369
Training	Various	299
Admiral Nurses	Coventry & Warwickshire CCG	299
Primary Care Surge	Coventry & Warwickshire CCG	250
SMI's	Coventry & Warwickshire CCG	122
Notes Summarising	Coventry & Warwickshire CCG	120
DESMOND	Coventry & Warwickshire CCG	76
Total		11,400



KEY

- Extended Access 28%
- ATPs 22%
- PCN Support Services 19%
- Miscellaneous Income 7%
- Hot Hubs 6%
- Covid @ home 4%
- PAVS 3%
- Training 3%
- Admiral Nurses 3%
- Primary Care Surge 2%
- SMI's 1%
- Notes Summarising 1%
- DESMOND 1%

During 2021/22, the Alliance continued to develop and diversify its service offer, resulting in a £2.4M increase in income. New income streams have been sought which combined with building on existing portfolios has decreased the reliance on the Extended Access contract which ceases in 2022/23. Our income from sources other than Extended Access grew by £3.181m which has reduced the percentage that Extended Access contributes to our overall income from 40% to 28%.

Key areas of service growth include:

ATPs

2021/22 was the first full Financial Year since being awarded the contract, this service delivered an income stream of £2.553m which was an increase of 56% on the 9 months reported in the prior year.

PCN Support Services

Our PCN service support has continued to expand throughout 2021/22 delivering an income of £2.199m which is a year-on-year increase of 75%. As at 31st March 2022, there were 5 PCNs that had

taken up our Platinum service which provides a full PCN service support package. Our ARRS workforce increased from 40 to 68 as we support PCNs to maximise the national investment in new roles.

Hot Hubs

This service was set up in 2020/21 in response to the Covid pandemic, the service remained throughout 2021/22 and delivered increased volumes of services, resulting in a 121% increase from the prior year.

Covid @ Home

In response to the Covid waves witnessed throughout 2021/22, this service was commissioned for the entire year delivering a total income of £417k, an increase of 416% on the prior year.

Primary Care Surge

This is a new service that was introduced during the year, the income recognised amounted to £250k with expectations that this service will continue for the foreseeable future.

Financial continued

Our Spending

The Alliance's spending amounted to £11.35m in 2021/22, compared to £9.126m in 2020/21. Pay related costs accounted for 84% of the total expenditure with the remaining 16% relating to premises and general overhead expenses. A breakdown in our spending is shown below:

Cost Heading	Expenditure 2019/20	
Pay Costs	£000s	£000s
GP Locums	2,601	
Clinical & Support Service Staff	3,671	
ARRS Roles	1,841	
Corporate Staff	948	
CWIPC	299	
Directors	158	9,518
Establishment Costs		
Electric Wharf	81	
Hub Charges	101	
ATP Rent & Service Charges	491	682
General Administrative Expenses		
IT equipment, software & support	411	
Stationery & Postage	22	
Training	7	
Legal Fees	12	
Professional services	54	
Insurance	80	
Medical Consumables	202	
CQC	19	
Accountancy	35	
Practice Charge	203	
Other Miscellaneous	106	1,151
Total		£11,350

2021/22 Annual Accounts

The annual accounts for the year 2021/22 have been prepared by Ballards LLP and show a reported profit before tax of £49,676. Corporation Tax to the value of £9,438 is payable resulting in a post-tax profit for the year of £40,238.

The reported profit for 2021/22 is a financial improvement when compared to the post-tax loss of £81,139 that was reported in 2020/21.

At the end of 2021/22, the Alliance had retained earnings of £731,025 representing the accumulated net profits since its incorporation.

Contingent Liabilities

As at the end of 2021/22, the Alliance is not aware of any potential liabilities which may crystallise in the 2022/23 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	6,334.20	-	-	01/02/2019	
I Taylor	Practice Director	16,999.96	1,123.32	-	-	01/11/2019	
HS Mann ¹	Practice Director	10,426.64	218.95	1,499.36	-	01/11/2019	30/11/2021
P Sekhon ²	Practice Director	14,378.67	764.33	-	-	01/02/2021	31/01/2022
AD Dabas	Practice Director	6,515.25	758.35	936.89	-	01/11/2021	
S Allen	Practice Director	-	-	-	-	01/11/2021	
EA Kelly	Non-Executive Director	13,685.04	668.61	-	-	01/03/2017	
P Elkin	Non-Executive Director	13,685.04	668.61	-	-	01/08/2017	
P Marson	Non-Executive Director	14,085.04	723.81	-	-	01/03/2021	
Total		144,515.68	11,260.18	2,436.25	-		

Notes

¹ Dr Hardev Singh Mann resigned from the role of Director on 30 November 2021

² Dr Prab Sekhon resigned from the role of Director on 31 January 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 which have been prepared 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 2022;
- in accordance with the relevant accounting standards; and
- in accordance with the requirements of the Companies Act 2006.

In 2021/22, the Alliance has breached the limits of a 'small' company as we have exceeded all of the following:

- annual turnover must be not more than £10.2 million
- the balance sheet total assets must be not more than £5.1 million
- the average number of employees must be not more than 50

A company will cease to be small only when the limits are exceeded for two consecutive years. We did not breach the limits in 2020/21 so have prepared 'small' accounts for filing for 2021/22. The company will be subject to a full audit in 2022/23 if the above limits are exceeded again within the year.

Looking Forward

Extended Access contracts for Coventry, Rugby and Warwickshire North have been extended to September 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 October 2022. The Alliance will provide Enhanced Hours services on behalf of any PCNs that wish to utilise the Alliance's support.

The Alliance will continue to develop and maintain the Alliance Teaching Practices during year 3 of the contract and 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 Steve Allen
Practice Director



Dr Arun Dabas
Practice Director



Pat Marson
Non-Executive
Director



Paul Elkin
Non-Executive
Director



Eamonn Kelly
Non-Executive
Director



Josie Spencer
Interim Chief
Executive Officer



Dr Chris Taggart
Medical Director



Sarah Weir-Smith
Chief Nurse & Speak
Up Guardian



Daljit Sandhu
Chief Operating
Officer

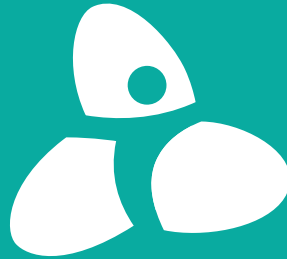


Joanne Shaw
Chief Primary Care
Officer

Our Chair and Medical Directorate

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





COVENTRY
& RUGBY
GPALLIANCE

Coventry and Rugby GP Alliance

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