



CHAIRMAN'S FORWARD

Dear Member

I am pleased to provide you with this report about South Durham Health (SDH) Community Interest Company's work over the past year.

We came into 2019/20 with uncertainty about the future of several of the NHS Agreements we hold, with a proposed competitive tendering process for the Vulnerable Adults Wrap Around Service (VAWAS) and a public consultation on the future arrangements for the extended access service (Primary Care Service) underway. We ended the year with the VAWAS contract having been renewed (now with NHS County Durham CCG) and having managed the transition to new operating arrangements for the Primary Care Service. Thank you to the practices operating these contracts on our behalf and their staff who continued to provide much valued services.

One of the primary aims of SDH is to support general practice as the best way of delivering the personalised, comprehensive health care which is essential to the health and well-being of people in South Durham. Through the contracts we have secured or administer we generated income during the year of £4,831,381 with £4,516,148 of this going into practices, either directly through payment for delivery of subcontracted services, through the funds we offer to practices to support activities in line with our objectives as a Community Interest Company, or indirectly through services delivered to practices by organisations with whom we subcontract or by the provision of training and education.

In the early part of the year, we continued to support the five Primary Care Home groups in South Durham and their wider "TAPs" (Teams Around Patients). SDH's role took on a new dimension as the groups took the decision to register as Primary Care Networks (PCNs) and sign up to Network Agreements in July 2019. We are delighted that PCNs have chosen us to act as their managing agent and this has been major part of our work programme for 2019/20 and 2020/21.

The work associated with PCNs led the Board to support recruitment to two additional Business Manager posts. Margaret Ross, who has worked closely with SDH as Practice Manager at Marlborough Surgery, has joined the team, and we plan to recruit to the other post shortly. We also strengthened our governance arrangements with the welcome addition of Sandra Mason as our Nurse Lead.

Much of 2019/20 involved dealing with challenges familiar to our team from previous years. The year ended with the unprecedented emergency created by Covid-19 and the need to work with PCNs and practices and support them with new ways of working, whilst federation staff and directors themselves had to adapt to a very different working environment. It remains our commitment to offer a professional and responsive service to our member practices and their networks in the uncertainty of the year ahead.

Dr Kamal Sidhu

Chairman

ABOUT SOUTH DURHAM HEALTH

South Durham Health (SDH) is a federated group of general practices. The federation serves the localities of Easington and Sedgefield and surrounding areas in County Durham. General Practices have agreed to work together to better meet the needs of the communities they serve. To support this goal, they have formed a not for profit Community Interest Company (CIC). The members of the CIC are partners in our practices and they select members to serve on a Board of Directors which provides leadership for the federation. In addition we have a Chief Executive, Business Managers, Clinical Governance Lead, a Lead Nurse and an Administrator to work alongside the Board and members.

Our Goals

Community Interest Companies exist to promote the interests of local communities. The purpose of South Durham Health CIC is:

To relieve illness and promote health in South Durham - the work of SDH will improve health care services for people living in South Durham to help them live healthier, happier lives, and:

To ensure that General Practice in South Durham is viable – the work of SDH will support general practices as the best way of delivering the personalised, comprehensive health care which is essential to the health and well-being of people in South Durham.

Our Objectives

Our objectives are:

To work with patients and communities and understand the health needs of people in South Durham so that we can work with the practices to design and deliver the right services for the future.

To make South Durham an outstanding place to train and work as a primary health care professional so that there are the skills and the capacity available to general practice to meet the needs of patients.

To provide services so that we can support general practice in meeting the needs of patients and so that we can generate resources to invest in programmes which support our objectives.

To promote and support shared good practice, collaborative working and shared services amongst our member practices so that they can make most effective use of resources and continuously improve their services.

To do business effectively so that we can best meet the needs of our members.

To give general practice in South Durham a strong voice in shaping the future of health services in the North East by being a **credible partner and engaging with networks, formal and informal**.

To seek and deliver additional resources to assist general practice to sustain and develop services and to support practices in difficulty, in accordance with the wishes of our members.

ACHIEVEMENTS

Our Services: Meeting the Needs of Patients

A key objective of South Durham Health is to provide services that support general practice in meeting the needs of patients.

Primary Care Service

The Primary Care Service in Easington and Sedgefield has been a pilot for primary care extended access since April 2017. The features of the Service are that:

- It must be accessible to all DDES residents;
- Provides only an urgent same day minor ailment service; and
- Offers appointments triaged and booked via NHS 111 (with some capacity for patients who meet the criteria for the service to be booked directly by their practice).

South Durham Health holds two contracts, covering services provided from five locations. We have experienced Advanced Nurse Practitioners plus reception staff working in the Service which is managed on behalf of South Durham Health by GP practices who are members of the federation. Local GPs across the federation are also contracted to work in the service.

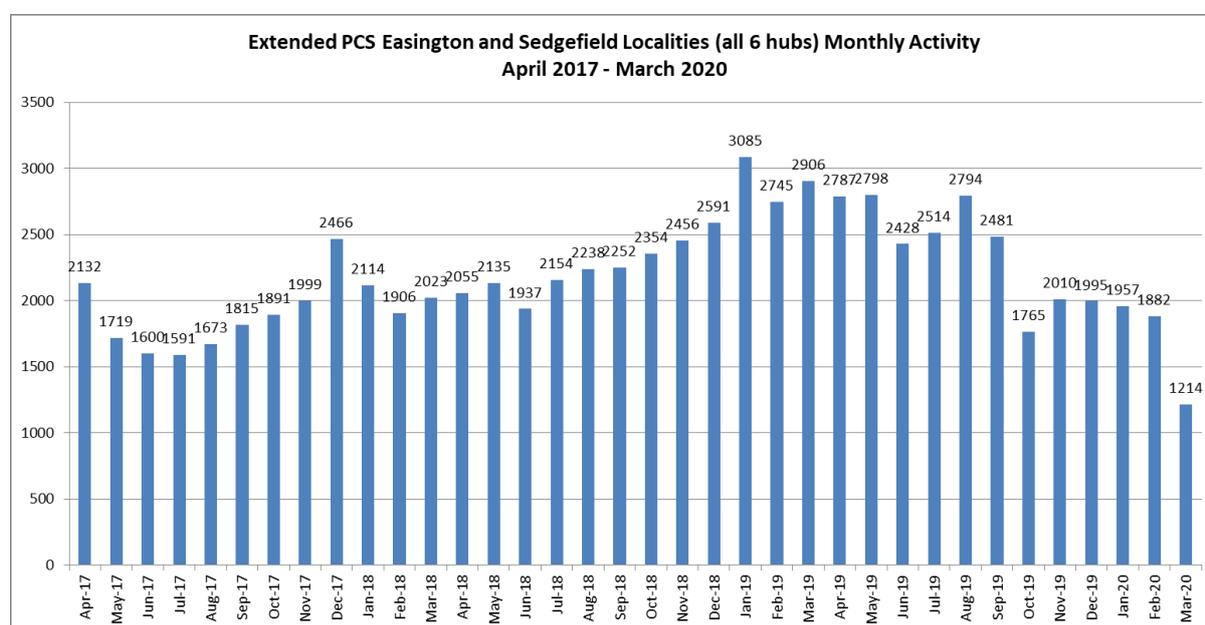
NHS County Durham CCG undertook a review of this service a year after operations started and engaged with patients, communities and practices to consider how the service could best meet local requirements going forward.

We worked with the CCG to implement a new service specification from October 2019 which limited appointments at the Peterlee and Seaham services to 6pm to 8pm during the week and restricted the Sedgefield site (Harbinson House) to weekend opening. All sites now offer some pre booked appointments (aimed primarily at patients who work away) and there is a limited visiting service for housebound patients.

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Whilst these were relatively minor changes in Newton Aycliffe and Spennymoor, the alteration to hours of operation posed a real challenge in Peterlee and Seaham as to how best to staff two hour rather than twelve hour shifts during the week. This resulted in a change in the subcontracted practice employing staff at Peterlee and a formal TUPE transfer of staff between practices. At Seaham, it proved impossible to secure ANP cover for the limited hours of operation and the work has been covered by GPs instead. South Durham Health is grateful to all the practices that provide the service for their flexibility in managing the change and for continuing to provide a responsive service.

The appointments provided by the Service had increase steadily since the service was first offered in April 2017, but have of course reduced in number with the change to more limited hours.



We regularly gathered patient feedback on the service during the first six months of the year. In Quarter two, 100% of respondents to the Friends and Family Test said that they were either likely or extremely likely to recommend the service with comments on the approachability and empathy of the staff:

“The staff listened to me and understood”

“Prompt polite and caring staff”

“Lovely attitude caring person thank you.”

From 1st April 2021 the budgets for primary care enhanced access will be directed by the NHS County Durham CCG to PCNs in the first instance, in line with the approach taken since July 2019 for extended hours budgets for practices.

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PCNs will therefore need to decide how they wish to use this resource to meet their patient access obligations under the PCN DES and whether they wish to collectively commission the same services as now in terms of PCS hubs and extended hours at practices, or if they wish to design a different model to deliver the outcomes.

SDH has offered to continue to manage the Enhanced Access Contract on the PCNs' behalf, working with the current provider practices to deliver the service, in line with the PCNs and CCG requirements, should this be what networks prefer.

Diabetes Service

The Integrated Diabetes System in the DDES and North NHS County Durham CCG area entered its fourth year in July 2019. SDH continued to work closely with the Diabetes Systems team and collaborative partners: County Durham and Darlington NHS Foundation Trust, North Tees and Hartlepool NHS Foundation Trust and South Tyneside and Sunderland NHS Foundation Trust. The delivery of diabetes services for the vast majority of Type 2 patients with diabetes is now embedded within primary care and on an exceptional basis has been offered to some Type 1 patients who were reluctant to engage with care in Secondary Care settings.

The delivery of this system way of working is overseen by the Diabetes Governance Board and Locality Groups. SDH is an active member of the Easington Locality Group, Sedgfield Locality Group and the Diabetes Governance Board and has representation from our GPs and Practice Nurses on these groups, to ensure local needs are reflected in agreed Action Plans and objectives for further improvement. By the end of 2019/20 all practices within SDH Federation had achieved the highest care level (Care Plus Plus) reflecting the investment made in workforce training and education and increased capacity and skills sharing resulting from practice mergers.

During April/ May 2019 the Locality Groups took time to reflect on achievements to date and completed a mid-point evaluation and SWOT analysis of the Integrated Model. This acknowledged the benefits seen locally for staff and patients, including the provision of easily accessible and relevant education for clinicians, ease of access for patients to care, reduced waiting times, reduced duplication of review appointments, standardised care, shared learning and better team working between primary and secondary care clinicians. The challenges for the Integrated Diabetes System in the year ahead are responding to the COVID-19 pandemic and reviewing how care can be safely and effectively delivered to patients across primary and secondary care, taking advantage of digital technology wherever possible to support new ways of working.

For 2019-20 a dedicated local educational session was commissioned from the popular NB Medical 'Hot Topics' for Diabetes, held in June 2019. This received excellent feedback from attendees and a further session has been commissioned for the following year, to support our clinicians in their CPD (Continuing Professional Development):

"Fantastic, really useful and brilliant lecturer"

"Always well organised, great take home books, always enthusiastic presenters"

"Speaker excellent, enthusiastic, motivating"

"Informative, well-presented, with excellent access to post course literature"

"Really enthusiastic, motivating speaker. Covered an amazing amount of ground" "Really up to date evidence is really interesting and your opinion on this helps"

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In addition the balance of the diabetes training budget held by SDH was used to reimburse practices requiring accredited training where they have experienced turnover in their GP and Practice Nurse leads, or wished to train additional clinicians with a view to improving capacity and resilience for their diabetes care provision in practice.

During the year, South Durham Health took on responsibility for administering payment to practices for the delivery of diabetic foot screening and basic dietetic advice for patients through practice-based patient care. This was a new initiative commissioned by DDES CCG to improve the access and uptake by patients to these important quality markers for good diabetic patient care.

Primary Care Mental Health Service

This service, commissioned by DDES CCG and operated in partnership with Tees, Esk and Wear Valley Foundation Trust and the IntraHealth Federation continues to be well received by patients and practices. Examples of feedback from October 2019 included:

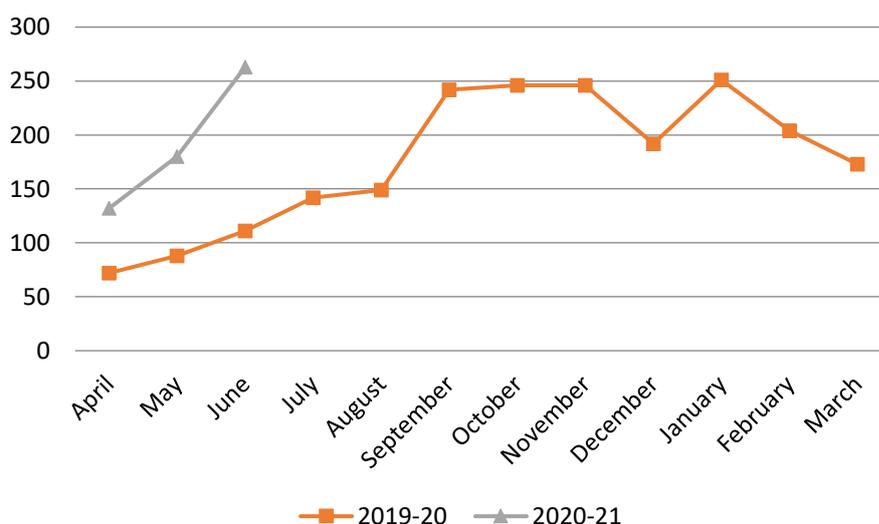
“Really helpful and friendly service. Gave good advice and guidance regarding next steps. Explained things really well and listened to what I had to say”

“Really helpful and passed me on to the right people for my situation”

“I really appreciate the help when I felt that no one cared”

The service continues to experience a high level of demand.

Number of new patients per month



It is not possible to provide a comparison with the 2018/19 activity as a lot of the data was held on practice systems.

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Individual practice referral rates can fluctuate considerably on a monthly basis, leading to case load pressures for the aligned mental health nurses. The need for a digital caseload tool to support the team manager in identifying pressure points was highlighted. Members of the team also offered additional weekend working sessions to help reduce waiting times for patients when there was high demand or staff turnover in a particular area.

During the year we implemented use of a SystemOne community module to collect and report data, which has improved the timeliness and quality of the information available to clinical staff but we continued to face problems with extracting data for reporting purposes. This is now improving and for 2020/21 we will have access to better management information for operational and strategic planning.

We continue to experience high staff turnover, in part because staff are encouraged to achieve accreditation as prescribers and have good career opportunities as a result. As a result of the roll out of the service model to Durham and Darlington during 2019 two team members were successful in securing new Band 7 team leader posts. The service has however been successful in recruiting to vacancies.

The early months of 2020 saw the unexpected arrival of COVID-19 and the necessity for all primary care and community services to change the way they delivered care, for the safety of patients and practitioners.

From March 2020, the service has been delivered by practitioners working remotely from home offering telephone appointments to patients instead of face to face appointments within General Practice. This reduced footfall in General Practice as they responded to social distancing requirements, but ensured that patients still received support for their mental health conditions. This was in general very well received by patients, and the allowed the mental health practitioners to offer a very prompt and responsive service. Patients were also offered video consultations, but few took up this offer with most preferring telephone support during the pandemic. Referral rates from General Practice initially declined in line with other services experience, but have now begun to build again. The model of service in future will need to take into account the lessons learned from this experience.

Vulnerable Adults Wrap around Service

As part of the CCG re-procurement of community services across DDES, Darlington and North Durham, VAWAS became part of the specification for this larger contract, which was awarded to County Durham and Darlington Foundation Trust in 2018. SDH and Jubilee Medical Group (who employ the ANPs) provided the day time service under a sub-contract to County Durham and Darlington Foundation Trust throughout 2019/20, with the service between 6pm to 8pm weekdays and at weekends still being contracted through NHS County Durham CCG.

The aim of the service remains to provide additional proactive primary care support for those most vulnerable patients across County Durham; to provide care closer to home; to improve access to primary care and to reduce in-hours and out-of-hours avoidable admissions and support the CCGs in reducing Emergency Department attendances (including Urgent Care Centres)

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The VAWAS team consists of 15-16 full and part-time, highly experienced ANPs, who support the most vulnerable and elderly patients, primarily in residential or nursing care homes, but also provide support to a smaller number of vulnerable patients living in their own homes, as identified by GPs. A snap shot in February 2020 showed that the vast majority (85%) of their work continued to be in care homes; up to 4% in patients own homes and 11% by telephone advice.

As agreed during 2018/19, the VAWAS team has been working wherever possible on a PCN team based approach, linking into the work of the TAPs and Virtual Ward concept. The PCN and TAP groups continue to be a useful basis for improvement and engagement discussions with a number of Care Home Managers and VAWAS ANPs. South Durham Health is working closely with County Durham and Darlington Foundation Trust on the planned roll-out of the HealthCall programme across residential care homes. Care Homes within County Durham and Darlington traditionally telephone for a referral to a district nurse or Community Specialist Practitioner/Community Matron/ VAWAS Nurses. This increases the workload on the care home staff to make the calls to the relevant services. The care home staff are now being trained on how to take observations and was assessed for competency against a developed WASP (Witnessed, Assimilated, Supervised, and Proficient) Framework. The Health Call system will allow staff within care homes to submit electronic referral information on behalf of their residents, so that it is accessible to the local health care professionals during the hours of 7:30am until 7:30pm Monday to Friday. The service acts as an early warning system, highlighting changes in health against comparable baselines, which may otherwise go undetected or treated. This service is already live with the District Nursing Service and will be extended to the SDH VAWAS service following updates to the software and successful system trials.

Looking forward into 2020/21, the VAWAS service will undergo a significant change in the way services are delivered, to respond to the pressures of COVID-19 in supporting Care Homes protect and care for their residents at this critical time. Change will also be driven by the Primary Care Network DES for Enhanced Care in Care Homes and the VAWAS service will work closely with PCNs in responding to the required changes to deliver on the national specifications.

NHS Healthchecks

The NHS Health Checks programme for the commissioners, County Durham Public Health, are delivered by means of collaborative approach with neighbouring federations in the Durham area. During 2019/20 practices took part in this contract according to their available capacity, to deliver health checks to eligible patients in the 40-70 year old age group. During this third year of the contract South Durham Health practices delivered an increased activity level of 2661 health checks and, combined with pulse rate and rhythm checks for the over 75 year olds without pre-established conditions and blood pressure checks for the 30-39 age group, the contract generated income for local practices of £107,432. Commissioners continue to see the collaboration as successful and have extended the contract to the end of 2020/21.

Anitcoagulation Monitoring

This contract was extended for a further year in 2019/20 pending a review of the Service and potential tendering process. The Governance Committee of South Durham Health regularly reviewS clinical data relating to this contract using a data set drawn from all the providers using the same software for induction, dosing and review of anticoagulation patients. Practices routinely perform well – during 2019/20 three practices (Bevan Medical Group, Byron Medical Group and Marlborough Surgery) were highlighted as achieving Time in Therapeutic range results significantly above the national average.

SUPPORTING GENERAL PRACTICE

South Durham Health works with its practices to provide a workforce which has the skills to respond to local health needs and ensure that there is the capacity within practices to deal with demand. This includes promoting the development of expanded roles for primary care staff, ensuring careers in South Durham are attractive and supporting practices to provide additional capacity and develop skills in priority areas.

Supporting the expansion of the skilled workforce in South Durham

New roles in primary care

We have supported the recruitment of clinical pharmacists into local practices through the NHS England scheme since its inception in 2015. Over the life of the scheme, eight pharmacists have chosen to work in South Durham, with the most recent recruit joining Skerne Medical Group in May 2019. The scheme has now closed as the emphasis has moved to Clinical Pharmacists working with Primary Care Networks. We have a good track record of recruiting and retaining staff locally, and supporting them to work as part of a broader team, which has placed local PCNs in a strong position to develop the new network role.

Career start

We continue to work with DDES CCG to support the delivery of the Career Start scheme which invites applicants to apply from across the UK for salaried GP posts, based in practices across Easington and Sedgefield. The successful applicants receive two years' joint funding from the CCG and Health Education North East. The GPs receive mentorship as well as help to focus on their clinical and personal development and the opportunity to take part in a range of educational activities.

Additional resources

South Durham Health continues to make available financial resources to support its member practices. Over the past four years we have funded additional GP and pharmacist sessions to improve the quality and coordination of support for patients with practices providing patient reviews, medication reviews, discussions with relatives, home visits and advice and support to the VAWAS ANPs. We provided £300,000 in 2018/19 from our own resources to continue this programme, as practices told us they valued the programme which supports the national and local strategy for frail elderly people.

We provided a Practice Support Fund which helped practices make small investments which they might not otherwise have been able to put in place to assist patients and make the operation of the practice more effective. This proved very popular.

There is extensive evidence that people with serious mental illnesses, such as schizophrenia, are at risk of dying on average 20 years prematurely. NICE guidelines state that everyone with schizophrenia should have annual physical checks. Yet the recent National Audit of Schizophrenia found that just 29% of people are receiving this. SDH offered financial support to practices to establish a register for patients with mental health issues on antipsychotics and a physical check for those who are stabilized on antipsychotic medication and are issued medication by the practice. All practices chose to participate and we hope that practices will establish a recall system and ongoing monitoring in line with NICE guidance.

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First Practice Management

Practices benefitted this year also from a bulk subscription which South Durham has taken out with First Practice Management to provide access to resources to support practice managers.

Collaborative Working

The aim of South Durham Health is to support practices to work together so that they can take up opportunities which otherwise would not be available to individual practices, to improve the resilience and to share ideas and good practice.

Primary Care Networks (PCNs)

From May 2019, individual GP practices were able to establish or join PCNs covering populations of between 30,000 and 50,000 (with some flexibility), with a DES (directed enhanced service) covering a number of areas, including funding for the provision of additional workforce and services that the PCN will be required to provide. South Durham Health built on the support we had offered to the five Primary Care Home groups in Easington and Sedgfield throughout 2018/19 to offer a service as managing agent to the new Primary Care Networks:

North Easington: Marlborough Surgery, New Seaham, Murton Medical Group, Byron Medical Group, Silverdale Family Practice

Clinical Director: Dr Rajiv Mansingh

Easington Central: Blackhall and Peterlee, William Brown Centre, Horden Group Practice

Clinical Director: Dr Nitish Sahoo

Easington District: Bevan Medical Group, East Durham Medical Group, IntraHealth at Wingate, Southdene Medical Centre

Clinical Director: Dr Dagny Samuel

Sedgfield 1: Bewick Crescent Surgery, Jubilee Medical Group, Peaseway Medical Group, Hallgarth Surgery

Clinical Director: Dr Winny Jose

Sedgfield North: St Andrews Medical Practice, Ferryhill and Chilton Medical Group, Skerne Medical Group, Bishops Close Medical Group, West Cornforth Surgery.

Clinical Director: Dr Matt Shield

We supported the PCNs with the registration process and worked closely with networks and the CCG to ensure that they were in a position to sign off the Network Agreement by the deadline of 1st July 2019. 2019/20 was a busy year for networks with a great deal of new guidance for members to absorb and respond to and short deadlines to be met for additional pieces of work such as the Maturity Matrix that each network was required to submit in September.

The Additional Roles funding available to networks in 2019/20 could be used to support Clinical Pharmacists and Social Prescribing Link Workers (SPLWs). All the networks supported by South Durham Health made appointments to network pharmacist roles during the year.

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Practices started in a strong position in that they had pharmacists employed through the existing NHS England Clinical Pharmacist in General Practice scheme who were eligible to transfer into the new network roles. Building on this experience, networks then successfully recruited or contracted for additional staff; with the result that there are currently fifteen pharmacists working for the five networks and being reimbursed through the scheme (total additional resource to practices for these roles was £94,744 in the year to March 2020). After evaluation and deliberation, all the networks opted to contract for SPLWs through County Durham and Darlington NHS Foundation Trust and are embedding this new role into local ways of working.

PCNs determined how the extended hours access appointments specified in the DES were to be delivered and have reported on their delivery throughout the year.

Networks engaged in the required peer review activity to demonstrate continuous quality improvement activity focused on end of life care, and regularly share and discuss learning from quality improvement activity as specified in the Quality and Outcomes Framework guidance. As part of the development of networks, we supported the Clinical Directors to run Time Out sessions for the staff of the core members and associated community staff providing an opportunity for wider engagement with the work of the network. These were well received by staff, with very positive feedback.

PCNs initially expected to have to respond to five new specifications during the year, but feedback on the burden that this was placing on member practices led to this agenda being slimmed down. Networks did engage with the guidance on Supporting Early Cancer Diagnosis. The COVID-19 pandemic resulted in much of the work planned for networks being suspended from March, with the focus instead being on supporting practices to cope with new demands and to support the health care system locally through additional out of hours services and redeployment of primary care staff to community and acute hospital settings. The urgency surrounding support for care homes led to NHSE publishing a request for primary care and community health services help, largely building on what practices were already doing, to support care homes which resulted in the alignment of CQC registered care homes to networks and individual practices, and the identification of a named clinical lead for each home.

Networks have continue to meet virtually since April and are making progress with the additional roles which can be recruited in the current financial year, with plans in place for First Contact Physiotherapists, Pharmacy Technicians, Physician Associates and Care Co-ordinator roles.

Training and development

South Durham Health runs protected learning time events for practices for all practice staff to update their knowledge and skills and to come to together with colleagues from across South Durham. We normally run four events in each locality. Sessions provide practices with access to essential training such as Adult and Child safeguarding and bespoke training sessions complementary to with the CCG's DDES wide events.

We run both Clinical and Non Clinical CPR at a number of the events across both localities. This is always very well attended and well received.

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This year the Dermatology Update by Dr Daron Seukeran from South Tees Hospitals received very positive feedback from GPs. We also provided clinicians with a session on supporting patients with tobacco addiction. The Nursing staff, as always found the Imms and Vacs update to be very useful and they really enjoyed the cardiovascular training that was offered. The Admin team were offered a range of sessions including Mindfulness, Transgender Awareness and Identifying Carers. Ashfield Healthcare provided a Conflict Resolution training session which was very well received - feedback confirmed staff would take back the skills they had learned in the session and use this in general practice. CPR training was offered at all events throughout the year.

South Durham continues to fund access to “Skills for Health” through which every practice can access e-learning for statutory and mandatory training.

We held sessions for Advanced Nurse Practitioners working in our Primary Care service to share information on the performance of the service, and any learning from incidents and complaints and to deliver training and education requested by the staff or indicated through incidents. Some of this training was also opened up to other staff in member practices.

Organisational Capability

One of our objectives is to do business effectively so that we can best meet the needs of our members. As the federation services have increased in number and complexity, we have recognised the need for more dedicated resource to support clinical governance. In addition to Dr Diane Robinson taking up the post of Clinical Governance Lead we also added a Nurse Lead into our governance structure, with Sandra Mason (Bewick Crescent Surgery) kindly agreeing to take on this role. During the year, Directors agreed to the appointment of a second Business Manager post, in large part to respond to the workload involved in supporting PCNs. We attracted two very strong candidates for the post, and concluded that the agenda for the coming months and years would justify appointing to a third Business Manager post. Unfortunately, Covid-19 led to the appointment to the third post being put on hold, but Margaret Ross joined the team full time in July and we are currently recruiting to the vacant post.

FORWARD PLANS

Our aspiration for the future is to continue to develop the capability, skills and capacity we need to support practices and their patients and to provide an expanded range of services working with and for practices so that we can meet our objective of delivering services which meet the needs of communities in South Durham.

We will continue to pursue programmes across our all of objectives in the next twelve months but, there will be a particular focus on the following:

- From 1st April 2021 the budgets for primary care enhanced access will be directed by the NHS County Durham CCG to PCNs in the first instance, in line with the approach taken since July 2019 for extended hours budgets for practices. PCNs will therefore need to decide how they wish to use this resource to meet their patient access obligations under the PCN DES and whether they wish to collectively commission the same services as now in terms of PCS hubs and extended hours at practices, or if they wish to design a different model to deliver the outcomes. As the incumbent provider SDH will be seeking to be the provider of choice for the five PCNs. SDH has offered to continue to manage the Enhanced Access Contract on the PCNs behalf, working with provider practices to deliver the service, in line with the PCNs and CCG requirements.

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- Developing a response to the anticipated revised service specification for the VAWAS service.
- Developing our role as a managing agent with Primary Care Networks as they further develop new roles and take on a wider role in extended access services.
- The future of “Time Out” sessions is unclear but we will continue to support practice training and development through virtual sessions where possible, and support PCN Time Outs as required. We will continue to fund subscriptions which give all practices access to on line training and First Practice Management. We will work with the Diabetes locality groups to ensure that training needs in this area are met, through funds provided by the CCG as part of the contract for the service. We are also providing through our discretionary funds access to money funding to support training needs. We are open to discussion about other training needs which could be met on a federation basis.

INVESTMENT PLANS

The income of South Durham Health is dependent on the contracts it holds. There will be significant changes to the way in which service such as the extended access, and possibly other “at scale” contracts are contracted for after 2020/21. For the coming year though, the federation does have certainty as to its income and is therefore able to continue to offer the following:

Additional activities in practices

A fund of £400,000 is available to practices. In previous years this has been directed largely at funding care home visits (as additional activities) by ANPS, GPs and pharmacists in line with CCG objectives of reducing admission and providing support for the vulnerable elderly and enhancing the quality of the services that practices can offer to their patients. Last year we also provided access to small sums of funding to support activities or purchases which otherwise practices might struggle to fund, which were in line with the aims of the Community Interest Company and:

- For the treatment of patients
- For the comfort and convenience of patients
- To manage the practice more effectively

In view of the extraordinary circumstances in which practices are operating this year, practices can apply for their allocation of funds to support any additional activity or purchase which will help them respond to the needs of their patients and staff.

To focus on the issue of inadequate physical reviews and suboptimal monitoring of people on medication and to support parity between physical and mental health, SDH offered financial support last year to practices to enable them to establish a register for patients with mental health issues on antipsychotics followed by a physical check for those who are stabilized on antipsychotic medication and are issued medication by the practice. We will continue to offer funding for reviews in 2020/21.

Training and development

We will continue to fund the training and development activities outlined elsewhere in this report.

THANK YOU TO MEMBERS

The Chair, Directors and staff would like to offer thanks to members of the federation for their engagement and support during the past twelve months and we look forward to working with all member practices in the coming year and with all core member practices of the five PCNs for whom we are managing agent, as well as the wider network teams.

SOUTH DURHAM HEALTH C.I.C.



BALANCE SHEET

AS AT 29 FEBRUARY 2020

		2020		2019	
	Notes	£	£	£	£
Fixed assets					
Tangible assets	4		31,756		29,158
Investments	5		100		100
			<u>31,856</u>		<u>29,258</u>
Current assets					
Debtors	6	524,647		409,804	
Cash at bank and in hand		<u>2,086,866</u>		<u>1,343,521</u>	
		2,611,513		1,753,325	
Creditors: amounts falling due within one year	7	<u>(2,590,920)</u>		<u>(1,696,406)</u>	
Net current assets			<u>20,593</u>		<u>56,919</u>
Total assets less current liabilities			<u>52,449</u>		<u>86,177</u>
Reserves					
Income and expenditure account			<u>52,449</u>		<u>86,177</u>

For the financial year ended 29 February 2020 the company was entitled to exemption from audit under section 477 of the Companies Act 2006 relating to small companies.

The directors acknowledge their responsibilities for complying with the requirements of the Companies Act 2006 with respect to accounting records and the preparation of financial statements.

The members have not required the company to obtain an audit of its financial statements for the year in question in accordance with section 476.

These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements were approved by the board of directors and authorised for issue on 22 July 2020 and are signed on its behalf by:

Dr KS Sidhu
Director

Company Registration No. 07807964

SOUTH DURHAM HEALTH C.I.C.



INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 29 FEBRUARY 2020

	Note	2020 £	2019 £
Income		4,831,381	4,579,518
Cost of sales		<u>(4,516,148)</u>	<u>(4,164,513)</u>
Gross surplus		315,233	415,005
Administrative expenses		<u>(349,460)</u>	<u>(312,267)</u>
Operating (deficit)/surplus		(34,227)	102,738
Interest receivable and similar income		<u>499</u>	<u>218</u>
(Deficit)/surplus before taxation		(33,728)	102,956
Taxation	3	<u>-</u>	<u>(41)</u>
(Deficit)/surplus for the financial year		<u><u>(33,728)</u></u>	<u><u>102,915</u></u>