



Annual Report

1st April 2016

To

31st March 2017

Introduction

This year has been a challenging year which started with the Committee's resolve to deliver their vision statement, **"Supporting and Fighting for Pharmacy,"** by continuing to organise and articulating its opposition to the Government's proposed national contract. This was somewhat curtailed with the termination of negotiations and the imposition of the contract. Whilst nationally this has been challenged by PSNC and the NPA via a judicial review, it was decided to concentrate on supporting pharmacies in terms of maximising the financial return that could be gained from Quality Payments. In doing so, the Committee decided to use a substantial amount of its financial reserves, mindful that with such imposed cuts, it didn't want to raise the levy as other LPCs had done. It took the view that such reserves were set aside for a rainy day and that it was now raining heavily.

This report will highlight the above mentioned and more by reflecting upon the past year in an omnibus.

Chair's Report (Liz Colling)

This will be my last annual report as Chair. I will be stepping down for a number of reasons, not least because I have been elected to NYCC and there is the potential for conflicts of interest.

I shall continue to serve on the Committee and I am really looking forward to making the case for community pharmacy at County Hall whenever I can.

It has been my great honour to help steer CPNY through some significant changes as we grapple with a new commissioning environment and a new NHS contract.

No one ever said it would be easy, but the pace of change is astounding.

We have responded by examining every area of our operations and ways of working. The office has developed to provide excellent support for contractors and has done exemplary (and often copied) work in helping navigate the contract changes particularly around quality payments.

As the external landscape changes so too do our key stakeholders, whilst relationships with CCGs are important to us, each one in our area has severe financial issues and does not see community pharmacy as part of the solution, despite all our best efforts.

We have had some great successes with our Local Authorities, in particular NYCC, the services they have commissioned through us form part of their key targets, for example the Falls Service.

If contractors are unable to deliver on these sorts of services then they will be decommissioned, and it will be difficult to argue for the network's role in future local service delivery.

One of the Committee's challenges for next year is how do we effectively support contractors to deliver such services?

Another challenge is how do we change perceptions held in some areas that we are not frontline health care professionals?

We know we are, we support our communities each and every day with advice, interventions and referrals as well as supplying medicines, performing MURs and NMS. The Committee will be documenting those powerful messages, how many diabetics, asthmatics we see daily etc. and the interventions we make.

We will be regularly refreshing this information and using it to talk to all our stakeholders and partners about the huge potential that community pharmacy can offer.

The supply of medicines is a key function for us, but I hope we can all agree that this alone will not deliver a vibrant sustainable network and our future lies in using the expertise of our pharmacists and teams in our communities and delivering services that support the local health economy.

Healthy Living Pharmacies offers us a great opportunity to really engage with this agenda and I am pleased almost all contractors are signed up for leadership and health champion training.

It only remains for me to say thank you to the Committee for all their support and willingness to tackle the hard questions.

My biggest thanks go to our Chief Executive Jack and our Engagement Officer Laura who consistently deliver, find ways to improve and through their positive outlook and outstanding contributions drive us all onwards and upwards.

National Contract Negotiation and Organised Lobby

The Department of Health (DH) and NHS England showed no sign of railing back during ongoing negotiations with PSNC and in the face of considerable opposition from MPs representing both the Government's ranks and the Opposition parties. Despite this, on the 20th October 2016 with no warning, the NHS negotiators terminated the discussions on the contract and decided to impose the contract.

Prior to this locally, all our contractors rose in one voice collectively to lobby the Government. With the support of CPNY, a large number of contractors wrote directly to their MP and Councillors expressing their concerns with the proposed contract. CPNY organised a number of visits from MPs to their local pharmacies, in order that the pharmacist could explain, in person to them, what the impact of the proposals would be locally. In addition, a small number of pharmacies made appointments to speak to them at their surgeries. All pharmacies participated in the collection of signatures for the national petition against the cuts. Furthermore, representation was made to both City of York Council and North Yorkshire County Council.

The net result of all the above action was...

- All 8 of our North Yorkshire MPs wrote to the Pharmacy Minister expressing their concerns that such cuts would have on their communities. Sadly and all too predictably, they got the standard reply.
- During several debates in parliament on the matter, three of our MPs took part in the debates tabling and verbally asking questions.
- North Yorkshire Pharmacies made a large contribution to the national petition which resulted in 2.2 million signatures calling for the cuts to be reversed. The biggest petition ever received by Number 10 Downing Street.
- Resolutions were passed by both City of York Council and North Yorkshire County Council requesting that the Government carry out an impact assessment within their areas to measure the effects of the Government's proposals on local communities.



As stated above, this didn't deflect the Government off its track and the contract was imposed. As a result of this, PSNC and the NPA took the collective decision to seek a judicial review against the Secretary of State with regard to the negotiation process on the following grounds:

- A. Failing to inform himself adequately as to the effect of the proposals upon community pharmacy.
- B. Failing to respond frankly and fairly to reasonable requests of PSNC in the course of the consultation.
- C. Failing to disclose reasoning and rationale until after the decision had been communicated despite many requests.
- D. Failing to disclose the scope of further planned or developing changes and revisions to the sector in order to allow the Claimants to see and understand the context of the present proposed changes.
- E. Failing to expose for comment and discussion analyses and assessments that had taken place and were in the process of preparation relating to the proposals and their effect.
- F. Failing to deal openly and fairly with their statutory consultee and according to the established negotiation model used hitherto.

All LPCs were asked to make a contribution to the cost of the judicial review via a one off levy. CPNY's contribution was £14,273. The Committee made the decision to pay this cost from its reserves and not to pass the cost onto contractors. The review hearing was heard by Mr Justice Collins in Court 2 of the High Court commencing the 21st March and concluding on the 23rd March 2017. The decision is expected post-Easter.

Quality Payments

As part of the imposed contract, the concept of Quality Payments which amount to £6,400, was introduced. In order to claim this full amount, pharmacies have to gain the maximum 100 points, as detailed below, via a self-assessment process on two assessment dates at the end of April and November 2017.

- Production of a written report that demonstrates evidence of analysis, learning and action taken in response to near misses and patient safety incidents, including implementation of national patient safety alerts and having shared learning. (20 Points)
- 80% of registered pharmacy professionals have achieved level 2 safeguarding status for children and vulnerable adults within the last two years. (10 Points)
- Results of patient experience survey from the last 12 months published on the pharmacy's NHS Choices page. (5 Points)
- Healthy Living Pharmacy level 1 (self-assessment). (20 Points)
- Demonstration of having accessed the summary care record and increase in access since the last review point. (10 Points)
- NHS111 Directory of Services entry up to date at review point. (5 Points)
- Asthma patients dispensed more than 6 short acting bronchodilator inhalers without any corticosteroid inhaler within a 6 month period are referred to an appropriate health care professional for an asthma review. (20 Points)
- 80% of all pharmacy staff working in patient facing roles are trained 'Dementia Friends'. (10 Points)



The Committee made the decision to put considerable resources in terms of staff time and finances, from its reserves, to support pharmacies to gain the maximum number of points.

Via “Weekly Update” communication, CPNY has sought to make the process of completion to achieve each element as painless as possible. Feedback from contractors shows that this has been very helpful and made a positive contribution in supporting them.



One of the major elements is becoming a Healthy Living Pharmacy. In order to become a Health Living Pharmacy, each pharmacy must appoint a person in a leadership role as well as having someone willing to become a Health Champion. In order to ensure all North Yorkshire Pharmacies were in the best position to achieve these criteria, it was decided to arrange Joint Leadership and Health Champions training. The result is that to date the following training sessions have been funded and organised by CPNY...

- Sunday 21st May - Pavilions of Harrogate, Harrogate
- Thursday 25th May - Allerton Court Hotel, Northallerton
- Wednesday 7th June - Rugby Club, Scarborough
- Sunday 11th June - Parsonage Hotel, York
- Wednesday 14th June - Rendezvous Hotel, Skipton

Up take on these sessions has been high and the Committee is fully committed to ensuring all contractors have access to this training and if required, will fund further session/s. Post the training, CPNY will be setting up best practice forums on Facebook to aid and support health champions organise and deliver campaigns.

The self-assessment dates for Quality Payments are...

- 28th April 2017
- 24th November 2017

CPNY is fully engaged in supporting contractors, with the objective of ensuring that 80% of contractors reach the maximum number of points.

Strategic Plan

In early February 2017, the Committee had its annual strategic planning day. The objective of these days is to develop a strategic forward view and work-plan for the coming year. This year, the plan has four major objectives...

- Supporting contractors to achieve maximum quality payments points.
- Breaking down narrow perceptions of community pharmacy with stakeholders and demonstrating what they do now and could do in the future.
- Appropriate Sustainability and Transformation Plans involvement.
- Continue developing current relationships and creating new ones.

A full copy of the plan can be viewed on our website by clicking here. <http://cpny.co.uk/wp-content/uploads/sites/53/2013/07/Strategic-Plan-2017-18-Final.pdf>

Sustainability and Transformation Plans (STPs)

An STP is not just about writing a document, nor is it a job that can be outsourced or delegated. Instead it involves five things:

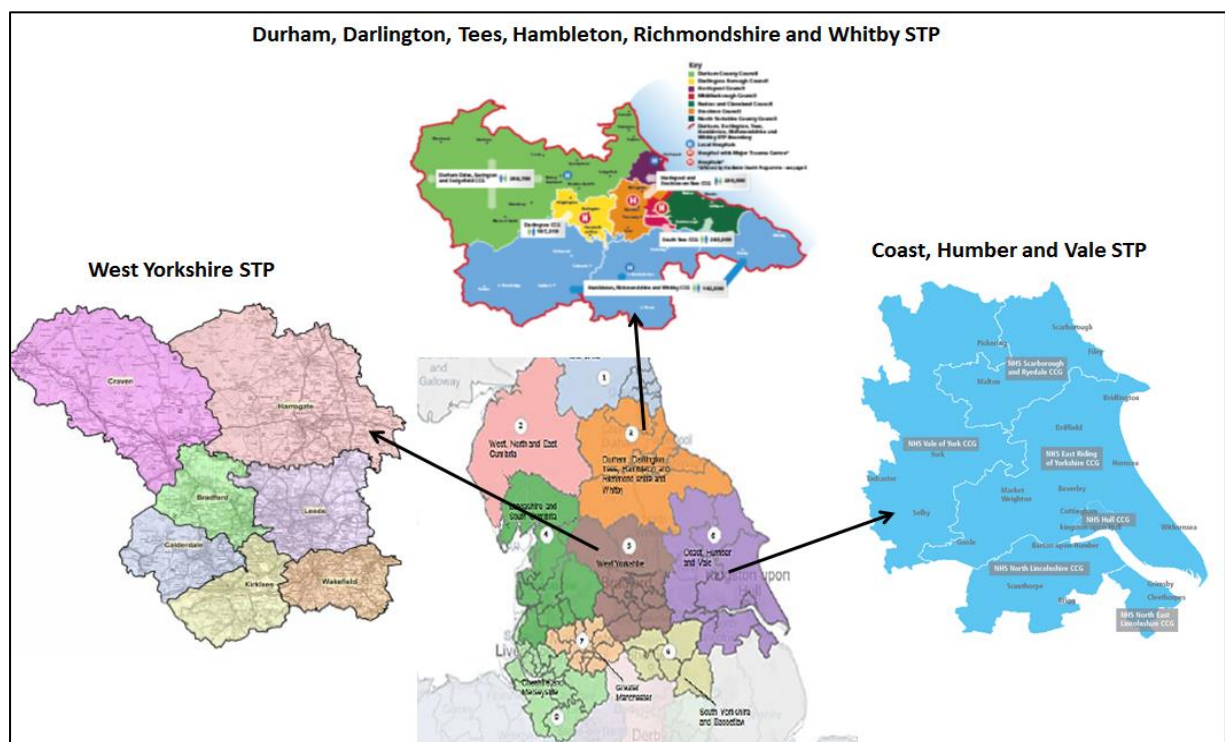
1. Local leaders coming together as a team. (CCGS)

- Each STP should serve as its own ambitious local blueprint for accelerating its implementation of the NHS 5YFV (Five Year Forward View). STPs should cover three main areas but the proposed scope of STPs is broad.

- It is important to stress an STP is not an entity; it is a facilitating instrument.

- Engage patients, staff and communities from the start, developing priorities through the eyes of those who use and pay for the NHS;
- Develop services that reflect the needs of patients and improve outcomes by 2020/21 and, in doing so, help close the gaps across the health and care system.
- Mobilise local energy and enthusiasm around place-based systems of health and care, and develop the partnerships, governance and capacity to deliver.
- Provide a better way of spreading and connecting successful local initiatives, providing a platform for investment from the Sustainability and Transformation Fund.
- Develop a coherent national picture that will help national bodies support what local areas are trying to achieve.

Within North Yorkshire there are 3 STPs. The graphic below identifies them and their footprint.



Each of these STPs has individual plans and aims. Nevertheless, all have a common strand of work based steering groups centred around each CCG. The strategic aim of the Committee is to “Ensure CPNY has appropriate involvement in STPs”. It is early days in the development of the work based steering groups and CCGs are just beginning to develop the local groups. However, CPNY has been able to secure a position on Scarborough and Ryedale CCG’s group entitled Ambition for Health. CPNY is continuing to seek representation on both the York and Hambleton, Richmondshire and Whitby CCG’s work based groups. With regard to Harrogate CCG, this is part of the very large West Yorkshire STP and our colleagues at Community Pharmacy West Yorkshire are leading on this and updating CPNY regularly on developments. Given the size of this STP, they have secured a place on a number of the work based groups.

Communication and Engagement

During 2016/17 the Weekly Update Email was migrated to Mailchimp to give it a more graphic aesthetic appeal and make it easier for contractors to read. As well as making it more integrative. For example, where an action required a pharmacy to make communication with the NHS on a matter, a one click button would facilitate a generated pre populated email. The Mailchimp weekly update came into its own with the introduction of Quality Payments with easy accessible information via a simple click. CPNY has received very positive feedback from contractors on both its contents and ease of use.

At present, the communication is received by 349 recipients. This includes not only pharmacies, but Area Managers, Superintendents, CCA Service Managers, Owners and Locums. It has become a reliable source of information and is used by Commissioners to communicate updates on matters that pharmacies need to know about.

After consulting contractors, it was decided to cease the posting out of a hardcopy of the bi-monthly newsletter. Whilst the feedback was positive regarding its content, only one pharmacy stated they would like to still receive a hard copy and CPNY will ensure they continue to do so. Hence the newsletter will be emailed to all pharmacies in a PDF format going forward.

The website now receives 1600 plus hits per month and is accessed as a first source for our contractors as it is populated with information that is relevant and timely. The main use of the website has been pharmacies accessing information and resources, instead of keeping copies of the information locally. For example:

- Service Level Agreements
- NHS, CCGs and Local Authority Contacts
- Training Information

In the coming year, CPNY will setup a Facebook page to support contractors with resources to aid the implementation of becoming a Health Living Pharmacy. It will also become an interactive best practice forum for pharmacies to share information and pose questions.

Direct contact with the office, via email and telephone, is up and is increasingly for many contractors the first port of call for both the multiples and independent contractors. Contractors raise a variety of issues and CPNY will always answer the problem directly or signpost them to the relevant information.

The overall communication and engagement with contractors is up in all areas and feedback from contractors is positive. However, CPNY will not sit back on its laurels and will continue the process with the development of a Facebook page as detailed above.

National Flu Vaccination Service

Pharmacies have had another record year administering flu vaccinations and keeping more people than ever safe this winter from flu. The total flu vaccination administered in North Yorkshire was 11,220, a 71.1% increase on last year's numbers of 6,595. Over the flu vaccination period, 113 pharmacies offered the service which is an increase of 10 on last year.

To support contractors, CPNY supplied all participating pharmacies with 1,000 free flu jab leaflets to encourage patients to have their vaccination in the pharmacy. Feedback from contractors was that this was a contributing factor to the increase in numbers. The Committee has made financial provision to do this again for the coming flu season.

Another contributing factor to the local success has been North Yorkshire MPs attending their local Community Pharmacy to have their jab. All 8 North Yorkshire MPs visited their local Community Pharmacy to promote the FREE national pharmacy flu vaccination service for vulnerable patients.

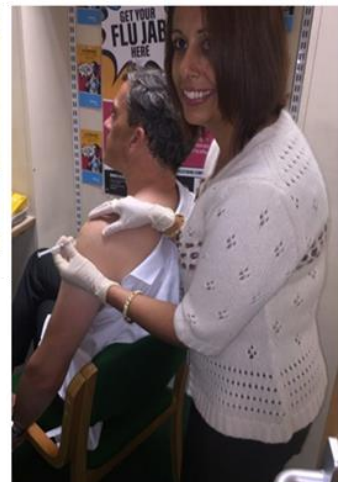
- Rachael Maskell MP - Whitworth Chemists, York
- Andrew Jones MP - Lloyds Pharmacy, Harrogate
- Rishi Sunak MP - Village Pharmacy, Catterick
- Julian Sturdy MP - Boots, Haxby, York
- Kevin Hollinrake MP - Becks Pharmacy, Thornton Le Dale
- Julian Smith MP - Pateley Bridge Pharmacy, Pateley Bridge
- Nigel Adams MP - Milford Pharmacy, South Millford
- Robert Goodwill MP - Boots Pharmacy, Whitby



Nigel Adams MP and Pharmacist Jon Kaye



Kevin Hollinrake MP with Anna Horton, Pharmacist at Becks Pharmacy



Julian Smith MP with Samina Khan, Pharmacist at Pateley Bridge Pharmacy



Boots Haxby Pharmacist Linda Fell and Julian Sturdy MP



Andrew Jones MP and Shaun Davies Pharmacist Lloyds Pharmacy Harrogate



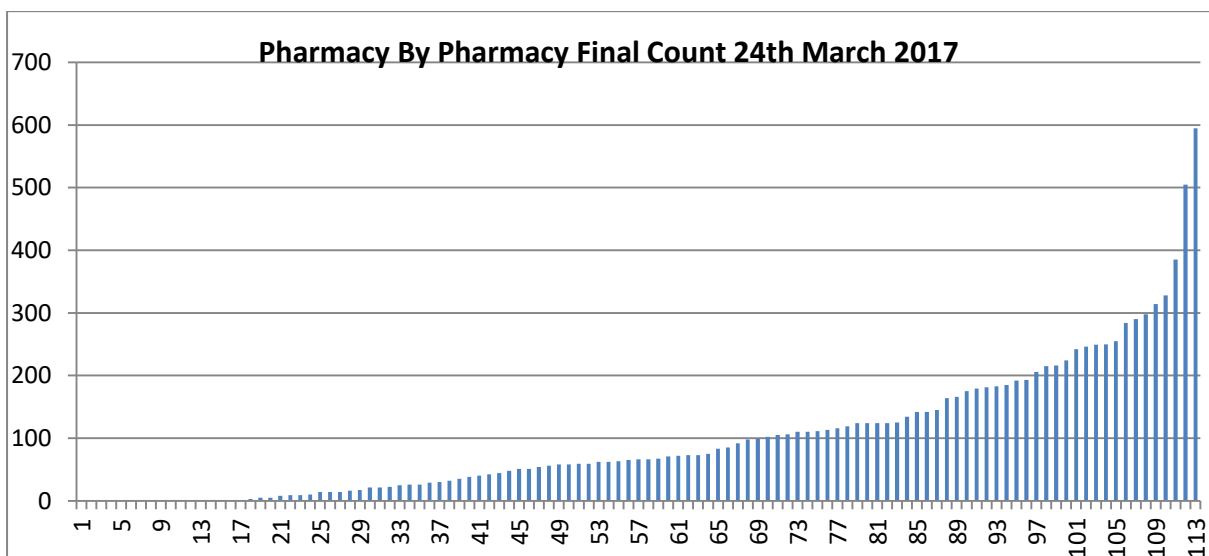
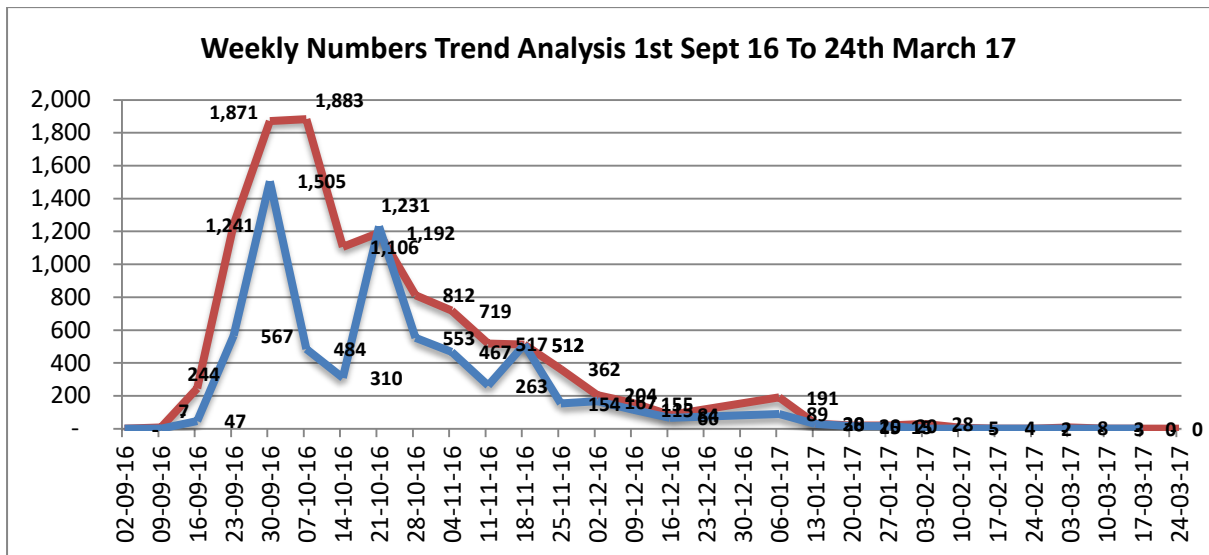
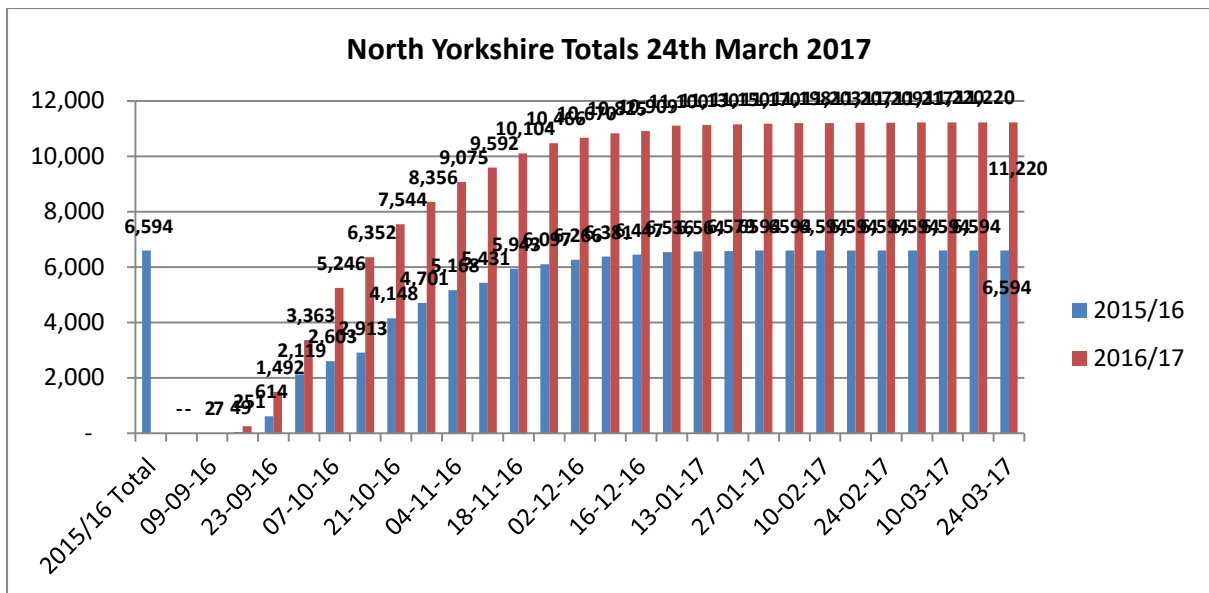
Rachael Maskell MP and Pharmacist Delia Aragon, Whitworth Chemists, York



Robert Goodwill MP, Boots Pharmacy, Whitby



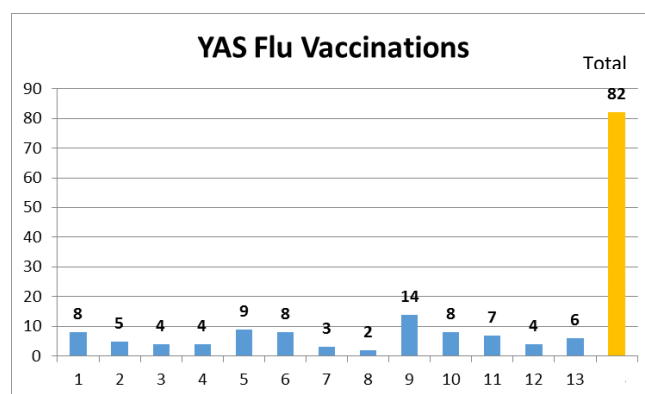
Rishi Sunak MP The Village Pharmacy, Catterick Village



With a 71.1% increase North Yorkshire Pharmacies played their part in another national increase. Data from PharmOutcomes and Sonar Informatics has confirmed that for 2016/17 the pharmacy

teams hit the 817k mark, although the total number of vaccinations administered will be even higher as some pharmacy teams did not use the electronic systems to record administration of vaccines.

In addition to the national service, 13 of our pharmacies were chosen to participate in the Yorkshire Ambulance Service staff vaccination service. Whilst the number was not very high due to ineffective internal communication and implementation of the service by Yorkshire Ambulance Service. Following a review of the process, they will be making changes to their communication and implementation processes for 2017/18.



Engagement with Commissioners and Enhanced Service

In March 2017 CPNY, in conjunction with Vale of York CCG, organised a North Yorkshire wide Pharmacy Development Plan session. In attendance were the following service commissioners in the area...

- Vale of York CCG
- Scarborough and Ryedale CCG
- Harrogate CCG
- Hambleton, Richmondshire and Whitby CCG
- Public Health City of York Council
- Public Health North Yorkshire Council

The main outcomes from the session were as follows ...

- Coordinated health promotion activity.
- Healthy Living Pharmacy development and integration with the work plans of attendees.
- Sharps Disposal Service for all areas similar to Hambleton District Council Service. It was agreed by all that commissioners would sign a letter requesting this service be implemented.
- Possible Hypertension/AF service - York CCG.
- Healthy Start Vitamins targeted service in York.
- Service delivery performance and Pharmacies signing up to deliver service and then not delivering any outcomes or very few.
- Appropriate referral to GPs - Offering to sell medicines before referring onwards.

Work has begun in working up these issues and it was agreed to meet in September to review progress. Furthermore, the participant agreed it was a worthwhile exercise and that it should become an annual event.

Current Local Enhanced Services (1st April 2016 to 31st March 2017)



During last year, CPNY has negotiated 3 new services: Sharps Disposal (Hambleton District Council); NRT Patches for Pregnant Women (Public Health City of York Council) and a Falls service (Public Health North Yorkshire County Council). Additionally, during this period negotiations were undertaken for the renewal of all the services with Public Health North Yorkshire County Council and it was agreed to renew existing services and the new Falls service for a five-year period.

Unfortunately, also during last year, both the Minor Ailments services commissioned by Vale of York and Hambleton, Richmondshire and Whitby CCG were terminated. Even though all the participating pharmacies played their part to ensure the service was delivered. This cannot be said of the GP Surgeries and the reason for closure of both services was the very low numbers of referrals. The lessons learnt are that GP referral services don't work and that self-referral services delivered in other areas are more successful.

Current Services by Commissioner

Public Health North Yorkshire County Council

- Alcohol IBA service
- Supervised Consumption
- Needle Exchange
- Sexual Health
- Smoke Free North Yorkshire - via Solutions4Health
- Falls
- Flu Vaccination (NYCC Staff)

Public Health York City Council

- Supervised Consumption
- Needle Exchange
- NRT Patches for Pregnant Women

Vale of York CCG

- Palliative Care

Scarborough and Ryedale CCG

- Palliative Care

Hambleton District Council

- Sharps Disposal

The Committee

Further, due to the retirement of Derek Clarke, Gill Treharne and Annette Mauder moving to another LPC area, three new members joined the Committee during 2016. These are Tracey Chambers, Steve Collins and Chris Kendall.

During 2016, two Committee members resigned (Lorraine Gell and Elliot Goran) and the Committee took the decision to reduce the size of the Committee from 13 to 11 until the Committee elections. This decision was made on financial efficiency grounds, along with other reasons, to ensure that the levy didn't have to rise, preferring to hold it at the current level.

Committee Members April 2016 to March 2017

Members	Role	Body Representing	Area
Tamzin Burn	Committee Member	CCA	Scarborough/Whitby
Liz Colling	Chair	CCA	Scarborough
Steve Collins	Committee Member	CCA	Harrogate
Warren Cunningham	Committee Member	CCA	Thirsk

Shaun Davies	Committee Member	CCA	Harrogate
Ian Dean	Vice Chair/Treasurer	IC	York
Tracey Chambers	Committee Member	IC	York
Tom Hajdas	Committee Member	AIMp	Scarborough
Richard Harrison	Committee Member	IC	York
Chris Kendall	Committee Member	CCA	Ripon
Samina Khan	Committee Member	IC	Pateley Bridge

Code CCA = Company Chemist Association representative
 AIMp = Association of Independent Multiple Pharmacies
 IC = Independent Contractor representative

Committee Members' Attendance at Committee Meetings and Strategic Planning Day

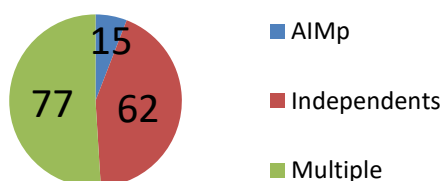
CPNY Member	May-16	Jul-16	Sep-16	Nov-16	Jan-17	Strategic Planning Feb 17	Mar-17	Total	Maximum Attendance	% Attendance
Warren Cunningham	1	1	1	1	1	1	1	7	7	100
Shaun Davies	1	1	1	1	1	1	1	7	7	100
Ian Dean	0	1	1	1	1	1	1	6	7	85.7
Lorraine Gell *	1	N/A	N/A	N/A	N/A	N/A	N/A	1	7	14.3
Elliot Goran *	1	1	N/A	N/A	N/A	N/A	N/A	2	7	28.6
Richard Harrison	0	1	1	1	1	1	1	6	7	85.7
Tamzin Burn	1	1	1	1	1	1	0	6	7	85.7
Tom Hajdas	1	1	0	1	1	1	1	6	7	85.7
Liz Colling	1	1	1	1	1	1	1	7	7	100
Samina Khan	1	1	1	0	1	1	0	5	7	71.4
Chris Kendall	1	1	1	1	1	1	1	7	7	100
Steve Collins	1	1	1	1	1	1	0	6	7	85.7
Tracey Chambers	1	1	1	1	1	1	1	7	7	100
Total	11	12	10	10	11	11	8	73	91	80.2

*Denoted resigned from the committee

CPNY Membership

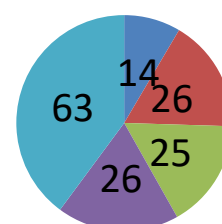
Membership Type	Total
AIMp	15
Independent	62
Multiple	77
Total	154

Membership Type



CCG	Total
Airedale, Wharfedale and Craven	14
Harrogate	26
Hambleton, Richmondshire and Whitby	25
Scarborough and Ryedale	26
Vale of York	63
Total	154

Membership by CCG Area



Committee Expenses

Name	Designation	Travel	Locum Cover for Attending Meetings	Total
Tamzin Burn	Member	£ 226.70	£ 1,650.00	£ 1,876.70
Tracy Chambers	Member	£ 139.00	£ 2,650.00	£ 2,789.00
Liz Colling	Chair	£ 1,328.52	£ 7,875.00	£ 9,203.52
Steve Collins	Member		£ 1,500.00	£ 1,500.00
Warren Cunningham	Member	£ 248.40	£ 1,750.00	£ 1,998.40
Shaun Davies	Member	£ 204.30	£ 1,500.00	£ 1,704.30
Ian Dean	Vice Chair and Treasurer	£ 810.10	£ 2,375.00	£ 3,185.10
Ian Dean (Yorcare Ltd)	Member	£ 170.60	£ 3,625.00	£ 3,795.60
Lorraine Gell	Member	£ 77.40	£ 500.00	£ 577.40
Elloit Goran	Member	£ 55.80	£ 500.00	£ 555.80
Tom Hajdas	Member	£ 254.65	£ 2,000.00	£ 2,254.65
Richard Harrison	Member	£ 162.10	£ 2,550.00	£ 2,712.10
Chris Kendall	Member	£ 212.40	£ 1,912.50	£ 2,124.90
Samina Khan	Member	£ 172.80	£ 1,250.00	£ 1,422.80
	Totals	£ 4,062.77	£ 31,637.50	£ 35,700.27

Treasurer's Report (Ian Dean)

The last year has been a challenging one for both Contractors and the Committee's funds. Following the funding reduction and the subsequent Legal Challenge, the cost of which has cost the committee £14,273.

The Committee also agreed to fund supporting Contractors to achieve maximum benefit from the new "Quality Payments" and a budget was agreed of £20k.

This impacted on the Committee's accounts in two ways, It will reduce the reserves the committee keep in line with PSNC guidance and we also identified that as a result of the way PSNC usually collects our levy (six monthly) there was likely to be a cash flow problem in 12 months' time if we did nothing about it.

The committee were resolute in our insistence that we would not pass our problem onto Contractors in the current climate by asking for an increase in the levy we collect so to deal with the issue we have embarked on an efficiency drive that has seen us not replace two members of the committee who resigned during the year to save on members expenses, reduce the spending on "hard mail" Newsletters and also agreed with PSNC a monthly style of payment of our levy to them.

As a result of these measures the committee have agreed a budget that keeps the accounts in a healthier state than they would otherwise have been

The accounts are audited annual by Royston Parkin Chartered Certified Accountants. Please see the audited accounts below.

North Yorkshire LPC

Summary of receipts and payments for the year ended 31st March 2017

	2017	2016
Receipts		
Levy	£ 141,000.16	£ 132,000.01
Interest	£ 420.01	£ 410.83
Miscellaneous	<u>£ 24,629.96</u>	<u>£ 9,397.60</u>
<i>Total Receipts</i>	£ 166,050.13	£ 141,808.44
Payments		
PSNC Levy	£ 40,744.00	£ 40,744.00
Staff wages	£ 37,756.74	£ 33,388.01
Staff expenses	£ 4,057.88	£ 7,883.87
Members expenses	£ 4,062.77	£ 4,397.53
Members locum re-imbursement	£ 31,612.50	£ 31,993.10
Room hire/meeting costs	£ 3,938.94	£ 4,251.18
Training/conference	£ 1,513.94	£ 4,613.70
Telephone	£ 69.99	£ -
Insurance Bank Charges and taxes	£ 113.60	£ 49.60
HMRC	£ 8,546.58	£ 7,392.33
Auditor	£ 468.00	£ 622.00
Payroll service fee	£ 108.60	£ -
Recruitment	£ -	£ 2,081.75
Sundry	£ 304.37	£ 542.11
Sponsorship	£ 30.00	
Service Gift	£ -	£ 130.00
Newsletters / Leaflets	£ 3,417.00	£ -
Stationery and IT	£ 733.90	£ 41.24
Subscriptions	£ 299.00	£ -
PSNC Legal Fee	£ 14,273.00	£ -
Office fees	£ 3,380.00	£ 3,320.04
Pharmoutcomes	£ 2,008.28	£ -
unpresented cheques w/off	£ -	£ 192.30
<i>Total Payments</i>	<u>£ 157,439.09</u>	<u>£ 141,642.76</u>
<i>Difference between Receipts and Payments</i>	£ 8,611.04	£ 165.68
<i>Opening Bank Balance</i>	£ 60,431.81	£ 61,329.83
Deduct unpresented Cheques	£ -	£ 1,063.70
	<u>£ 60,431.81</u>	<u>£ 60,266.13</u>
	<u>£ 69,042.85</u>	<u>£ 60,431.81</u>
Add unpresented cheques	£ 2,391.76	
<i>Closing Bank Balance</i>	<u>£ 71,434.61</u>	<u>£ 60,431.81</u>