



PINN MEDICAL CENTRE PATIENTS' ASSOCIATION

Registered charity NO: 1095260

MINUTES OF THE TRUSTEES MEETING

Held at the Pinn Medical Centre on Thursday 9 July 2015 at 16.30

Present: Jim Bradford - Chairman – items 1 to 6
Joanne Daswani - Acting Chair, items 7 to 12
Sheila Cole
Chris Daly - Secretary
Jagdish Kapur
James Kincaid
Brian Yim Lim

Also attending from PMC (items 1 to 4 only):

Dr. Isobel Bleehen
Hilary Scott – Practice Manager

1. Apologies for absence

Ivor Thomas - Treasurer

2. Minutes of meetings

The minutes of the Management Committee meeting, held on 8 April 2015, and the draft minutes of the Annual General Meeting, held on 9 June 2015, were agreed. The AGM minutes are subject to further comments from the PMCPA membership.

3. Matters arising

There were no matters arising not covered by the meeting agenda.

4. PMC Update

4.1 Friends and Family test

Hilary circulated the results of the Friends and family test for the period January to June 2015. This showed that, of the 254 respondents, 227 were either “extremely likely” (168) or “likely” (59) to recommend the PMC. Hilary added that the number of complaints received about getting appointments at the surgery was falling.

4.2 Staff

Dr. Keylock was now on maternity leave and the PMC was interviewing GPs to cover for her. A new doctor, Dr. Mukerjee, would be at the surgery at weekends, increasing the number of appointments available then.

A nurse practitioner, Lorraine Redican, had started in May and the PMC was looking for one more nurse or nurse practitioner. They were also seeking to replace the pharmacist, who had retired.

4.3 Personal Medical Services Contract

This contract was currently under review by the surgery. Under the contract, the surgery is able to appoint more staff but has to provide additional services over and above the general contract and also offer longer surgery hours. The PMC will make its submission to NHS England the following week. It is possible that the enhanced services at the PMC would stop, depending on the outcome of the discussions with NHS England. Hilary added that the walk-in service had been extended to September and was then subject to further review.

Jim said that the Friends and family test was no real use to the PMCPA Board compared to the previous patient survey that it had replaced. The PMCPA could not be expected to be a Patient Representative Group if the PMC did not provide the resources to get the necessary feedback from patients.

4.4 Complaints procedure

Hilary mentioned that people have complained that there isn't an Email address to send complaints to. She has asked the partners to review this.

5. Constitution developments

The updating of the proposed new Constitution was reviewed as part of the preparation for the forthcoming EGM. The question was again addressed as to whether or not the charitable status was worth keeping, given all the complications this was causing in, amongst other things, complying with Charity Commission rules and regulations. The previous benefit of being able to recover VAT on purchases made for the PMC had fallen away. This was believed to be because the purchases made were not for the charity itself but for the PMC. The main objections to dropping the status were that the PMCPA would lose a certain amount of its status and prestige which, in turn, could impact on donations received. **It was agreed that Ivor would check the VAT situation again with Hilary.**

The other issue was whether or not the PMCPA should be the PMC's Patient Representative Group (PRG). **It was agreed that this was a matter for the PMC itself to initiate** but that nothing should be included in the Constitution in this respect. Jim added that the majority of patient associations in Harrow were not set up to be PRGs.

Sheila advised that some members commented to her that they were not at all happy with the lengthy discussion of the Constitution at the recent AGM and that they would not be attending future meetings. There was therefore concern that even fewer members would attend the EGM so, to avoid the possibility of the Constitution being voted on by a very small number of members, a procedure for voting by proxy would be set up for those not attending.

With regard to the explanatory note to accompany the draft Constitution on the website, it was agreed that **Chris would circulate a draft by 17 July for Trustees to comment on by 24 July.**

6. Chairmanship of PMCPA and Trustees

Jim gave his formal notice of resignation as Chairman of the PMCPA and as a Trustee, with immediate effect. It was voted unanimously that Joanne Daswani should be the Acting Chair until the EGM in September. The intention was to formalise this situation at the EGM, depending on the outcome of discussions there.

The Board gave Jim a vote of thanks for the tremendous way he had held down the office for the last five years. Jim then left the meeting and Joanne assumed her role as Acting Chair.

7. Pinn Piper/Volunteer drivers

The Summer 2015 edition had just been published. Jagdish asked if it was intended to work towards circulating it electronically but Sheila noted that not all patients had the technology to receive it.

Sheila advised that there were 30 drivers, some of whom only did certain days or times. The Board gave a vote of thanks to Sheila and the drivers for the sterling work they do.

With regard to the Piper's publication costs, Jo advised that the Gor Pharmacy had sponsored the latest edition with a contribution of £150, this being £100 for the design and £50 left to the PMCPA.

8. PMCPA Website

Brian advised that the website was now up and running although it still needed some further work. It was intended to give it more prominence. The Pinn Piper plus the minutes of the AGM would be included on it as part of that process.

The meeting considered whether or not future items on the website might include, for example, health news and related topics. It was decided that there was a lot of work in summarising articles that appeared in other publications so it would be better simply to point out that those articles exist and to direct the reader to them. A page would be added in to enable them to do this. Anybody interested could then sign up to the appropriate websites to receive them at firsthand. This approach would also avoid any copyright issues that might arise.

The Board complimented Brian and Jagdish on the good work they had done in developing the website.

9. Recruitment of new Trustees

The Pinn Piper had carried a paragraph stating that 4 new Trustees were required. It was agreed that, in making future appointments to the Board, attention should be concentrated on the skill sets that were required, be they IT competence, a good grasp of written English, fund raising abilities and so on.

Consideration needed to be given to the procedures for dealing with any applications that were received and Jo undertook to circulate a note on this in due course.

10. How to increase Membership

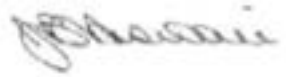
It was agreed that this was a key area that needed consideration. Options included notices at the surgery, promotion of the PMCPA through the Pinn Piper, setting out what it is, what it does and so on. It was agreed to coincide this promotion with the next issue of the Piper.

11. Date of next meeting

The next meeting was set for 22 October, subject to the availability of the meeting room and PMC staff. Jo undertook to check this with Hilary.

12. Any other business

There was no other business for the meeting.

Minutes approved by Board of Trustees	Date	Signature
Chair of Board of Trustees	22/10/15	

Trustees have used the traffic light (RAG) system to evaluate their actions on specific points of the recorded minutes up to the date of approval.

- Red:** Action required as a matter of urgency
- Amber:** Requiring review or improvement
- Green:** In place, up to date, and requires no further action