



Pinn Medical Centre Patients' Association (PMCPA)

**Chair's Report from 22 October 2015 to 24 February 2016
Presented to PMCPA's Board Meeting on:**

Date	Thursday 25 February 2016
Time	5.30 pm
Location	Pinn Medical Centre: Conference Room

All action points arising out of the last meeting on 22 October 2015 have been addressed. These were to:

1. Update the Charity Commission (CC) on the Constitution changes -CD
2. Plan the recruitment process and prepare all related documents -JD, BYL & JK.
3. Complete and publish 3-Year Strategic Plan (SP) on the website-JD
4. All Trustees sign the Code of Conduct - CD

Since that Board meeting (22/10/15) I am pleased to say we have made significant progress in our 3- Year Strategic Plan. Progress so far relate to:

Recruitment

A robust recruitment drive for new Trustees was implemented between the period 27 November 2015 and 13 February 2016 resulting in eight applicants applying for the position of Trustee. All eight applicants met the requirements of the Person Specification and were invited to interview. The recruitment panel was unanimous in its decision to propose four applicants to the Board for appointment.

Should the Board approve these recommendations the four candidates will be presented for election by the Membership at the next AGM (June 2016).

All applicants were asked if they would be interested in volunteering in some capacity with the PMCPA whether appointed or not. They all confirmed they would be interested in doing so.

Candidates will be informed of the Board's decision after today's Board meeting (25/2/16) including further discussions regarding their involvement in a sub-committee.

The Constitution also makes provision for Members to put themselves forward or be nominated for election at an AGM. We are still interested in having a Trustee with experience and skills in publishing and website design so we will need to decide whether to open this to the membership at the next AGM. Our search for a Trustee (Co-opted)

with experience of charity law is still active on the Bar in the Community website. We are currently one of thirty-nine charities advertising for a Trustee on this website.

Induction of new Trustees

The Charity Commission (CC) recommends that Trustees have an induction. I endorse this and suggest the following:

- A tour of the facilities by HS corresponding with a welcome event by the Board – this may be lunch or Tea and ideally should take place before the AGM in June. We can decide on some possible dates today and these can be discussed with them when the offer is made tomorrow.
- A buddy system for new Trustees where each new Trustee is partnered with a current Board member
- An information pack which includes:
 - A welcome letter
 - Some historic information about the association and its activities
 - The Constitution
 - Recent Charity Commission's Report
 - Signposting to our website where past Minutes of AGMs and Board meetings are located including our 3 Year Strategic Plan

Funding Update

In the past the association was reliant on donations from three funding streams:

- I. Donations from patients who used volunteer drivers to attend appointments at the Practice
- II. Funds raised at social events (Quiz nights)
- III. Personal donations from patients who wished to express their gratitude to the association/ Practice.

The majority of this funding has been used to purchase equipment for the Practice not covered by the NHS and for other expenses incurred in running a small charity such as hall rental for our AGMs and advertising posters etc.

At the last Board meeting Trustees agreed to continue to use donations from patients and the public for the purchase of equipment which enhances the quality of care for patients but which are not covered by current NHS funding.

We agreed that as the association grows it would need to have funding from elsewhere, especially if it were to achieve some of the objectives in its strategic Plan (SP). The Board agreed that we would request operational funding from the Practice (10 pence per patient) to facilitate our development as a Patient Participation Group (PPG). Our rationale was that in seeking to engage directly with patients and in raising the profile of the association as the PMC's established PPG we were supporting one of the requirements of the new GP contract (April 2015). It therefore seemed appropriate that the PMC offer some financial support in meeting the objectives of the association.

This request was made to the Senior Partner (Dr AK) and he approved this request in principle. I understand HS has a cheque to present to us.

We have also continued to raise additional funding through advertisements in the Pinn Piper. Please see the Treasurer's report for a full account of the Charity's finances.

Constitution Update

The charity's entry on the Central Register of the Charity Commission has been updated to record the adoption of the new Constitution (24 September 2015). Unfortunately there is a small technical issue regarding Clauses 4.5 and 10. The minutes of the EGM on 24 September 2015 did not reflect the '**subject to**' approach pertaining to these two Clauses and as such the CC has stated that the meeting could not have adopted these two Clauses as part of the Constitution. They should in effect have been read out individually with the 'subject to' approach applied to each.

This is a minor administrative hitch and they have asked us to 'formally' ask Members to vote on these two individual Clauses. We have retained the 2002 wording in the interim period and shall seek re-adoption of these two Clauses from Members at the next AGM.

GP Patient Survey (GPPS) - Jan 2016

The most recent GPPS by Ipsos Mori was released in February. Please see **Appendix II: RAG Rated Summary of PMC Results** for the main findings. The report gives a clear indication that patients are highly satisfied with the services and care they receive from the staff (doctors, nurses and receptionists) at the PMC. 83% of patients expressed overall satisfaction with their experience of the surgery. Opening times and convenience of appointments also score highly with patients.

Although patients generally felt that waiting times were too long they indicated high satisfaction (90%) with the time they received with their doctor.

On behalf of the Board I wish to thank the Practice staff for their dedication and hard work. We are extremely fortunate to have the quality of care and services we receive despite the challenges faced by the PMC and the NHS as a whole.

The areas requiring most improvement were in accessing online services. The PMC's performance was marginally better than other Practices locally and nationally but this is still no way near what is required to off set the demand on telephone access. Only 10% of patients use online services to book appointments compared with 82% who do so by telephone.

This is an area where the PMCPA and the PMC could collaborate together to achieve better outcomes. This could involve raising patient's awareness of the services that are

available and how they can be accessed. The marketing sub-committee can explore this in future meetings.

Patient Engagement

We have made slow progress in increasing our Membership database and have only marginally increased requests for electronic copies of the Pinn Piper. Brian will give us an update on our current position. I have also asked Brian to devise a wish list for improving the website and database.

The PMC Diabetes evening event was over subscribed with about 70 people attending and about 20 on a waiting list. We missed an opportunity to be involved and raise our profile.

The questionnaire we helped designed to survey patient satisfaction with the care provided by nurses was well received and we plan to continue to do more of these in the future.

Quarterly Strategic Meeting with JD, AK & HS

I met with the Senior Partner (Dr K) and the Practice Manager (HS) on 18 January 2016 We discussed:

- I. The funding grant
- II. PMCPA's involvement in the Health fair planned for 15 May 2016
- III. Topics for future health talks that might include:
 - Dementia
 - Living with cancer
 - BS
 - Asthma & Lung Disease/COPD
- IV. Further to our request, the Partners have suggested the following items as possible purchases by the PMCPA:
 - A portable ECG machine
 - Sit on weighing scales for disabled patients
 - A wheelchair

HS will look into costs and get back to us.

It was agreed that we would have four of these meetings a year to discuss strategy and collaborative work between the PMC and the PMCPA.

Sub-committees

I suggest we delay the final decision on the names of sub-committees and who leads on these until the next Board meeting when new Trustees are present

Harrow Patients' Participation Network (HPPN)

The Compact between Harrow CCG and HPPN was finally signed on 1 December 2015 with funding of £1050 released for HPPN to undertake the following projects in 2016:

- a. A mentoring Programme between established PPGs and those who are new or less established. The objectives are for all GP Practices in Harrow to have a PPG by the end of 2016 and for HPPN to create an Assessment Framework that would establish what excellent patient engagement looks like in Harrow.
- b. A school's programme that incorporates aspects of preventative health education, career opportunities and young people accessing services on the NHS.

I have been asked to lead the Mentoring Programme and be a co-lead on the School's Programme. Since December we have made good progress on delivering the outcomes we have set out to achieve.

Trustees are invited to attend HPPN meetings if they so wish.

I wish to thank Trustees for their contributions over the past few months.

Joanne Daswani

Chair

24/2/16