



**PINN MEDICAL CENTRE  
PATIENTS' ASSOCIATION**

**Strategic Plan  
Review: March 2017**



## **Pinn Medical Centre Patients' Association (PMCPA) 3 –Year Strategic Plan (2015 – 2018)**

This Strategic Plan sets out PMCPA's vision and the core activities that the charity plans to undertake over the three years 2015 – 2018. Its purpose is to help Trustees plan ahead and ensure that the objectives are clear, and that they are confident that all the operational activities contribute towards achieving the charity's overall objectives. The next full Strategic Plan will be prepared in 2018, for the Annual General Meeting of the Association in June 2018. In the meantime this document is an update of the original plan to inform the Board and Membership of progress against the objectives first established in 2015.

The three-year plan was developed by PMCPA's Trustees, with the valued input of the Senior Partner of the PMC. It was written for all Members of the PMCPA and for all supporters and volunteers who have an interest in seeing the charity succeed.

***The main object of the PMCPA is to assist in the relief of sickness and the protection and preservation of public health by providing services which support the activities of the Pinn Medical Centre, Love Lane, Pinner, Middlesex and to give additional benefits and assistance to patients by such means as:***

- i. providing a transport service, a shopping service and a home visiting service for the patients of the Pinn Medical Centre (PMC) and to relieve those who are caring for or nursing sick persons;***
- ii. funding the purchase of equipment for the PMC and assisting with other projects carried out by the PMC, so as to maintain and improve health care services for the public which would not normally be covered by statutory funds.***

*PMCPA Constitution (2002/redrafted 2015)*

The main theme for the three years is **“engaging with our patient community”**. This means that we will do more to ensure our activities are targeted to reach as many patients as possible.

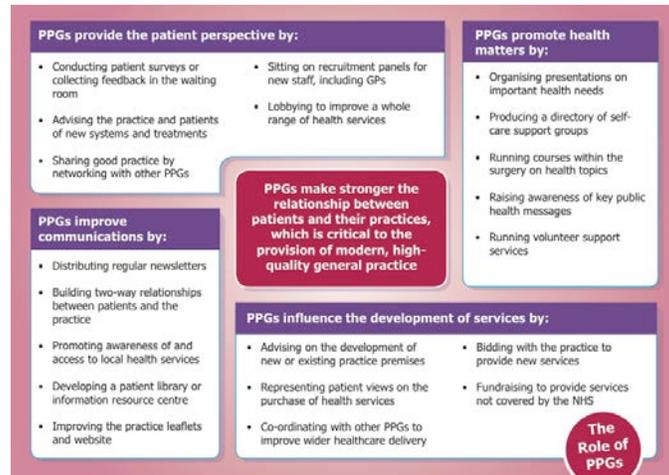
PMCPA's vision is of a patient community that works in partnership with the PMC to achieve the best possible care for the patients we serve. The PMCPA will, therefore, consult with the Membership of the Association on current and future services provided by the PMC.

The charity's challenge is to improve on the excellent work that is already being done and innovate at a time when resources are limited. The challenges facing the NHS will continue to grow as demand for services increase. As patients we want high quality, modern, sustainable care that is easily accessible. Patient engagement and involvement are key factors in determining the way services are designed and commissioned to meet the needs of our local community.

We therefore need more patients than ever before to support our work, shape our direction and help deliver our objectives. This means recruiting more Trustees, Members and volunteers as well as increasing income from a wider range of sources.

It is also fundamental to the success of the charity that the Trustees build clear communication links with our patient community so that our work is more widely recognised and we involve patients in planning activities that are responsive to their needs.

In 2015 it was recognised that it was imperative to recruit Trustees with the knowledge, skills and expertise to build capacity at Board level, to facilitate the objectives we intend to deliver as an innovative and successful PPG. Our Membership drive will be robust and, with the full support and involvement of the PMC, we aim to be more reflective of our patient community.



Adapted from resources created by NAPP at: [www.napp.org](http://www.napp.org)

Over the three years, the PMCPA was to concentrate on the following four priority areas:



These four priority areas remain our focus for the three years 2015 – 2018 but in view of a greater focus on patient involvement in the planning and delivery of service in the NHS, particularly in primary care, the Board has thought it appropriate to add a fifth priority - Consultation with Members. The Operational Annex attached to this Plan sets out the overall objectives for each of the priorities listed above, the specific actions that have been agreed by the Board for each priority, and the detailed progress against those objectives. In summary form the objectives and progress are as follows.

### **Priority 1 Recruit Trustees**

*Build capacity of the Board and sustain the future work of the charity.*

A recruitment campaign for new Trustees was undertaken in January 2016; four potential Trustees were selected; and, following the Board's recommendation, elected to the Board by the Association's Annual General Meeting in June 2016.

### **Priority 2 Strengthen the Charity and Innovate to meet New Challenges in Primary Care**

*2.1 Implement systems of governance that are clear, transparent and meet good practice guidelines of the Charity Commission and others.*

See the Operational Annex for details of documents/policies now produced.

*2.2 Maximise and extend the operations and role of the charity by assigning Trustees to lead sub-committees (also to include Members).*

Four sub-committees have been established. These are:

Communication (inc website) & Membership – led by George Bardwell

Marketing & Fundraising – led by Nicky Heskin

Educational talks & workshops – led by Joanne Daswani

Transport, shopping and Pinn Piper distribution – led by Sheila Cole

*2.3 Secure funding to support the charity's operational costs.*

The Partners of the PMC have agreed to provide 15p per patients (on the understanding the PMCPA meets all costs in connection with the Pinn Piper. Other funding is secured through Pinn Piper advertising.

*2.4 Build more collaborative opportunities between PMC/PMCPA*

PMC Senior Partner and PMCPA Chair meet quarterly. Collaboration has included the two surveys noted in Priority 5 below; the Health Fair in September 2016; PMC involvement in our membership drive; and fundraising to procure additional equipment for the PMC. More work is needed on patient surveys and patient consultation.

*2.5 Share good practice by networking with other PPGs.*

*2.6 Engage with Harrow Clinical Commissioning Group, through HPPN in seeking to improve and shape Primary Care service for residents of Harrow.*

The PMCPA Chair is an active member of the management committee of the Harrow Patients' Participation Network (HPPN), and leads its Mentoring Programme, a report on which has been submitted to the CCG.

*2.7 Develop and Expand Educational Talks and Workshops Sub-committee.*

*2.8 Develop a programme of support for carers.*

*2.9 Agree a programme of talks on self-care and preventative care with the PMC.*

*2.10 Organise a coffee morning for volunteer drivers and Pinn Piper distributors.*

For detailed action points and implementation plans see Operational Annex.

### **Priority 3 Increase and Diversify Membership**

*3.1 Recruit Members and other potential volunteers to support the work of the charity.*

The Association undertook a membership drive at the Pinner Village Show and at the PMC Health Fair in September 2016, resulting in a total of 62 new members. Further advertising at and by the PMC has also resulted in additional members signing up.

*3.2 Actively raise the profile of the Association to local Primary and Secondary schools to promote membership and involvement from a more diverse demographic of patients, particularly young people and the mothers/fathers of children.*

Further efforts are needed to diversify the membership, perhaps through schools and community groups and through wider advertising.

### **Priority 4 Improve Communication Links with the Patient Community.**

*4.1 To have open and regular communication channels between the Board and Members via email and website.*

*4.2 To review electronic systems, build capacity and innovate to sustain improvements.*

*4.3 To seek the views and opinions of Members about the services on offer at the PMC and use this feedback to ensure services are responsive to patients' needs and that they improve over time. (Moved to new Priority 5.)*

Communication with the Membership has increased substantially since August 2015; and the website development and maintenance remains under review by the Communications and Membership Sub-committee. Work is also in progress to encourage members (and PMC patients more generally) to receive the Pinn Piper by email instead of hand-delivery.

***Priority 5 Consultation with Members***

*To seek the views and opinions of Members about the services on offer at the PMC and use this feedback to ensure services are responsive to patients' needs and that they improve over time.*

In 2016 the PMCPA collaborated with the PMC to produce a questionnaire giving the patients' perspective on the performance of the Practice Nurses; and we disseminated the results of the General Practice Patients Survey Jan 2016. More work is needed in this area, particularly in view of the much greater emphasis on consultation through Patient Representative Groups.

Trustees agreed the original Strategic Plan on **22 October 2015**. It is a working document and Trustees have reviewed the objectives set out in the plan at each Board meeting. This update was prepared in March 2017, not least to update Members on progress against the objectives at the charity's AGM in June 2017.

**PMCPA**

**March 2017**





**Priority 2: Strengthen the charity and innovate to meet new challenges in Primary Care**

Overall Objective	Actions	When	Who	Resources	RAG Rating
<p>2.1 To implement systems of governance that is clear, transparent and meets good practice guidelines of the Charity Commission (CC) and others.</p>	<p>➤ Draft and implement the following documents:</p> <ul style="list-style-type: none"> <li>i. Code of Conduct for Trustees</li> <li>ii. Role of Trustees</li> <li>iii. Declaration of Conflict of Interest form</li> <li>iv. Job Description &amp; Person Specification for the roles of Trustee, Chair; Secretary and Treasurer</li> <li>v. Recruitment policy that reflects aims of the Constitution.</li> </ul>	<p>Completed by November 2015</p>	<p>Trustees</p>	<p>CC guidelines</p>	<p style="background-color: #92d050;"> </p>
<p>2.2 To maximise and extend the operations and role of the charity by assigning Trustees to lead sub-committees These sub-committees would also include Members/volunteers to encourage greater participation by the wider Membership.</p>	<p>Identify the work we wish to undertake over the next few months/year/two/three years and agree on the number of sub-committees needed to lead on these different functions. We will need to agree on names for these sub-committees and their remit. For example:</p> <ul style="list-style-type: none"> <li>➤ <b>Recruitment</b> – Trustees, Members &amp; volunteers</li> <li>➤ <b>Fund raising</b> – to organise fundraising events to purchase equipment for the PMC that is not covered by the NHS</li> <li>➤ <b>Health &amp; wellbeing</b> – supporting patients with transport and shopping, social activities</li> <li>➤ <b>Promotion</b> of health matters</li> </ul>	<p>January 2016 onwards</p> <p>Spring 2016 onwards</p> <p>On-going</p>	<p>Recruitment Sub-committee</p> <p>Fund raising Sub-committee &amp; IT SC</p>	<p>Posters (surgery &amp; website), recruitment pack</p>	<p style="background-color: #ff9900;"> </p>

<p>2.3 To secure funding to support the charity's operational costs. For example:</p> <ul style="list-style-type: none"> <li>i. Website development</li> <li>i. Database development</li> <li>ii. Data programme to support patient surveys</li> <li>iii. Designing and printing costs for posters/marketing etc</li> </ul>	<p>The Trustees do not wish to use donations from the public or from our fundraising events for operational costs. We believe these should be used to benefit patients directly and will remain separate from our operational budget.</p> <ul style="list-style-type: none"> <li>➤ We propose to make a reasonable request to the PMC of 10 pence per year per registered patient. This fund will help to support our operational costs and enable us to conduct the work of the charity in a professional manner</li> <li>➤ We shall continue to generate funds by offering advertisement space in the Pinn Piper to local health related businesses</li> </ul>	<p>November 2015</p> <p>On going</p>	<p>JD</p> <p>JD</p>	<p>PMC Partners/Chair PMCPA</p> <p>Editor Pinn Piper</p>	
<p>2.4 To build more collaborative opportunities between PMC/PMCPA</p>	<ul style="list-style-type: none"> <li>➤ Health promotion - liaise with the PMC to organise health awareness workshops/information events relating to prevention and self-care.</li> <li>➤ Conduct patient surveys and use this information to plan for future improvements where applicable and appropriate.</li> </ul>	<p>Timeline To Be Confirmed with Senior Partner and Chair at quarterly meetings.</p>	<p>JD/ AK/HS Trustees</p>	<p>Questionnaires</p>	
<p>2.5 To share good practice by networking with other PPGs</p>	<ul style="list-style-type: none"> <li>➤ Attend HPPN meetings; collaborate with and support colleagues from other PPGs</li> </ul>	<p>On going</p>	<p>JD (Chair)/Vice chair</p>	<p>Attendance and contribution to HPPN' objectives</p>	
<p>2.6 Engage with Harrow CCG through Harrow Patients' Participation Network (HPPN) in seeking to improve and shape Primary Care services for the residents of Harrow</p>	<ul style="list-style-type: none"> <li>➤ Inform and influence decision making at local level via our involvement with HPPN and through their partnership with Harrow CCG</li> <li>➤ Lobby to improve a wide range of health and social care services in Harrow</li> </ul>	<p>On going</p>	<p>JD (Chair)/ Vice Chair</p>		

2.7 Develop and expand Subcommittee responsible for Educational talks & workshops including preventative care, self care and community.	<ul style="list-style-type: none"> <li>➤ Follow up interested Members and secure membership to the committee.</li> <li>➤ Promote via email, website</li> </ul>	By end of February 2017	YH & JD	Invitation Letter Questionnaire Poster	
2.8 Develop a programme of support for Carers.	<ul style="list-style-type: none"> <li>➤ Collect data of: <ul style="list-style-type: none"> <li>• Registered Carers from PMC</li> <li>• Unregistered from SC</li> </ul> </li> <li>➤ Send out letter &amp; Questionnaire to Carers via PMC</li> <li>➤ Analyse data and plan activities based on data analysis</li> <li>➤ Open communication links with other Carer groups in Harrow/Harrow Carers</li> </ul> <p>Liaise with PMC for topics/facilitators</p>	March 2017	YH & SC	Data from PMC  Letter Questionnaire	
2.9 Agree a programme of talks on Self care and preventative care with the PMC.	<ul style="list-style-type: none"> <li>➤ Email HS and AK</li> <li>➤ Discuss and agree topics and time frame with HS &amp; AK at quarterly meetings</li> <li>➤ Possible topics may be: <ul style="list-style-type: none"> <li>• Diabetes in children and young people</li> <li>• Dementia</li> <li>• Physically disabled</li> <li>• Mental health in Young people</li> </ul> </li> <li>➤ Implement talks</li> <li>➤ Use opportunity to survey attendees on planning for future events.</li> </ul>	Feb 2017          At least one by May 2017	JD; YH; JK	Venue – PMC conference room Speakers Communication through Posters, email and website	
2.10 Organise a coffee morning for volunteer drivers and Pinn Piper distributors	<ul style="list-style-type: none"> <li>➤ A getting to know exercise with our volunteer drivers and distributors. Use the opportunity to share vision &amp; values of the Association and plans to expand its activities as stated above.</li> </ul>	March 2017	JD, YH, JK & SC	Refreshments	

## Evaluation/Outcomes -March 2016

**2.1 Governance:** The Constitution and all supporting documents have been completed in line with the Charity Commissions' guidelines. The Constitution was updated after a lengthy consultation period between 21 July and 21 August 2015 and ratified by the Membership at an EGM on 24 September.

**2.2 Sub-committees:** The Board has agreed the number of sub-committees but plan to wait for new Trustees to be appointed before finalising the structure and composition of such sub-committees.

**2.3 Funding:** The Partners of the PMC have agreed to our request for operational funding. In the past the PMC met all costs relating to the publication of the Pinn Piper. They have increased our request from 10 pence per patient to 15 pence with an agreement that we would undertake all costs relating to the PP.

**2.4 Collaboration between PMC and PMCPA:** The senior Partner now meets quarterly with the Chair and Practice manager to discuss collaborative ways of working and future strategic intent.

**2.5/2.6 HPPN involvement:** The Chair (JD) is an active member of HPPN's management committee. She wrote the Compact between HPPN and Harrow CCG that helped to secure a grant of £2500 from the CCG. She is actively involved in 3 of its main projects for 2016/18:

- I. Leading a Mentoring Programme where established PPGs support those who are new or less established. One of the objectives is for all GP Practices in Harrow to have a fully functioning PPG by the end of 2016.
- II. Supporting HPPN to create an Assessment Framework that would help establish what excellent patient engagement looks like in Harrow.
- III. Supporting a school's programme incorporating aspects of preventative health education, career opportunities and helping young people to have a more informed understanding of NHS services and how these can be better accessed.

## September 2016 Review

**2.1 Governance:** Job Descriptions reviewed for Chair, Vice Chair, Secretary & Treasurer. Amendments made to Secretary's and Treasurer's JD (3/9/16) and agreed at Board meeting (14/9/16).

**2.2 Sub-committees:** structure and composition proposed to Board ( 5/5/16) and at AGM (16/6/16). Sub-committees active July 2016.

Fundraising Sub-committee - raffle at Rotary event (10/9/16) and again at Health Fair (25/9/16)

Sub-committee	Trustees
Communication (inc. website) & Membership	<b>George Bardwell (Lead);</b> Brian Yim Lim & Jagdish Kapur
Marketing & Fundraising	<b>Nicola Heskin (Lead) &amp;</b> Phillip Snell
Educational talks & workshops including preventative care, self care and community care	<b>Joanne Daswani (Lead);</b> James Kincaid & Yvonne Haines
Transport, shopping and Pinn Piper distribution	<b>Sheila Cole (Lead)</b>

**2.3 Funding:** £3000 received from PMC (January 2016)

Advertisements sold in the Pinn Piper from September 2015 to September 2016 (4 issues) £900

**2.4 PMC/PMCPA collaboration:** Survey for Nurses and IPSOS Mori Survey (Jan 2016) summarized for Members.

Health Fair planned for 25/9/16 in partnership with PMC. Talk on Mindfulness sponsored by PMCPA; Raffle by Marketing Sub-Committee; Membership drive by Membership Sub-committee; Chair involved in overall organisation with PMC.

2.5/2.6 HPPN –Summary Report (Mentoring Programme - MP) presented by Chair (JD) to Harrow CCG and HPPN (June 2016). 2<sup>nd</sup> phase of the MP will be implemented from October 2016.

JD continues to network with, support and mentor other PPGs.

As a Committee Member of HPPN, JD continues to engage with Harrow CCG in helping to improve health and social care services. JD facilitated a public consultation meeting between the CCG and residents of East Harrow on the 3<sup>rd</sup> Walk In Centre at her school (22/6/16)

Priority 3: Increase & Diversify Membership					
Overall Objective	Actions	When	Who	Resources	RAG Rating
3.1 Recruit Members & other potential volunteers to support the work of the charity	<ul style="list-style-type: none"> <li>➤ Have permanent posters on display at the PMC (PMCPA notice board), local Pharmacies and library</li> <li>➤ On- going invitation to patients in the Pinn Piper and on both websites (PMCPA &amp; PMC)</li> <li>➤ Registering new Members at all future meetings/talks/workshops</li> <li>➤ Advertising on the TV Screen in the Waiting Room at the PMC and at reception</li> <li>➤ Include a Membership section/option on the registration form used for registering new patients</li> <li>➤ GPs to approach or invite/ nominate patients in those groups who are currently under represented</li> <li>➤ <b>Membership application forms to be freely available at PMC</b></li> <li>➤ <b>Membership of Association to be advised on prescription counterfoils</b></li> <li>➤ <b>PMC to email their virtual group of patients recommending membership of the Association</b></li> <li>➤ <b>Obtain banner and gazebo for use at Pinner Village Show, the Health Fair and other appropriate Shows/Fairs</b></li> </ul>	<p>On going from December 2015</p> <p>All issues of Pinn Piper/website</p>	<p><b>Oversight by Board, planning and implementation by Communications and Membership Subcommittee</b></p> <p>PMC</p>	<p>Posters</p> <p>Website information</p> <p>Stall Equipment</p> <p>Application Form</p>	

<p>3.2 Actively raise the profile of the Association to local Primary and Secondary schools to promote membership and involvement from a more diverse demographic of patients, particularly young people and the mothers/fathers of children.</p>	<p>➤ Organise meetings with:</p> <ul style="list-style-type: none"> <li>• Parent Association of West Lodge and Cannon Lane</li> <li>• Nower Hill – Upper Six Students</li> </ul>		<p>JD &amp; PS</p>		
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**Evaluation/Outcomes:**

**March 2016 Review:**  
Progress in this area has been slow but after a successful recruitment drive we are confident that we now have the capacity on the Board to make further improvements.

**September/December 2016 Review**  
Communications and Membership Subcommittee now active, meeting on 26 August and 11 October 2016.  
Gazebo and banner procured to facilitate membership drive at local events. Resulted in new membership applications as follows – Village Show 29, Health Fair 33.  
Advertising in PMC and email to virtual group of patients has resulted in 30 new membership applications in November 2016. Membership as at AGM June 2016 was 122; December 2016 membership 219. Next meeting of Subcommittee 11 January 2017 – will focus on maintaining membership increases, particularly through efforts to diversify the membership – perhaps through schools and community groups etc.; and through more active steps by the PMC.

Priority 4: Improve communication links with the patient community				
Overall Objective	Actions	When	Who	Resources
4.1 To have open and regular communication channels between the Board and Members via email, website	<ul style="list-style-type: none"> <li>➤ Continue to build database of Members with electronic contact details</li> <li>➤ Continue to develop the PMCPA's website</li> <li>➤ Continue to build database of Members with electronic contact detail</li> <li>➤ Collaborate with the PMC to ensure the patient association part of their website is regularly updated and information is in sync with that of the PMCPA's own website</li> </ul>	On going	BLY/JK	May have cost implications
4.2 To review electronic systems, build capacity and innovate to sustain improvements.	<ul style="list-style-type: none"> <li>➤ Ensure the purpose of our website is clear, and ensure that it is fit for purpose, accessible and readable for all</li> <li>➤ Continue to develop the PMCPA's website and other social media strategies to reach the wider patient population and raise awareness of our mission</li> <li>➤ Ensure our website is scalable and accessible from all platforms.</li> <li>➤ Determine whether our website provider is sufficiently flexible and provides value for money, now and in the future</li> <li>➤ Implement easier and more flexible ways of updating the website to enable all Trustees to update content with minimum technical knowledge.</li> <li>➤ Assess whether website maintenance should be outsourced to enable Trustees to focus on content, rather than maintenance.</li> <li>➤ Implement centralised and collaborative ways of storing, maintaining and disseminating</li> </ul>	Over the next 2 years	<b><i>Oversight by Board, planning and implementation by Communications and Membership Subcommittee</i></b>	Cost implications



Priority 5 Consultation with Members					
Overall Objective	Actions	When	Who	Resources	
To seek the views and opinions of Members about the services on offer at the PMC and use this feedback to ensure services are responsive to patients' needs and that they improve over time.	<ul style="list-style-type: none"> <li>➤ Conduct patient surveys via both websites and face to face with patients</li> <li>➤ Build two way relationships between patients and the practice</li> </ul>	On going	PMCPA/PMC	Website, Electronic & Printed Questionnaires, Pinn Piper May have cost implications	
Consideration to be given to patient surveys perhaps related to national NHS initiatives, and local issues.					

**Key: RAG Rating**

<b>Green= Outcomes Secure</b>	<b>Completed or on track to be completed as planned</b>
<b>Amber= Outcomes Secure</b>	<b>No risk to completion but amended in some way to ensure outcomes achieved</b>
<b>Red= Outcomes at Risk</b>	<b>Risk to outcomes being achieved and therefore contingency plans will need to be implemented</b>

PMCPA – Pinn Medical Centre Patients' Association

PMC – Pinn Medical Centre

Trustees Roles and Responsibilities as of 22 October 2015

JD- Joanne Daswani (Chair) & Education

GB – George Bardwell (Secretary & Membership/Comm)

PS- Phillip Snell (Treasurer & Fundraising)

SC- Sheila Cole: Transport & Shopping, Pinn Piper Distribution

BYL – Brian Yim Lim: Website and Communications

JK – Jagdish Kapur: Website & Communications

JK - James Kincaid: Vice Chair & Education

NH – Nicky Heskin (Fundraising & Marketing)

YH – Yvonne Haines: Educational and prevention