

**NORTHERN MEDICAL CENTRE**  
**PATIENT GROUP MEETING - AGENDA**

**Monday 08 December 2014**

**Present:**

**Northern Medical Centre:**

Dr Lawrence Kinsella – GP Partner (LK)  
Dr Lucita Yuen – GP Partner (LY)  
Dr Tony Banerjee – Salaried GP (TB)  
Mrs Marilyn Cadien – Practice Nurse (MC)  
Mr Jim Knox – Practice Manager (JK)

**Apologies for Absence:**

Dr Shivangi Thakore – GP Partner (STh)  
Dr Catherine Fardon – GP Partner (CF)

**Patient Group:**

Mrs Freda Hussain  
Mr Joseph Hussain  
Mr Anil Meghani (AM)  
Mr Roger Searle (RS)

**Apologies for Absence:**

Miss Sylvia Taylor

30 other members failed to respond to the invitation

1. Matters Arising from the Last Meeting.

a. This had been held on Tuesday 26 September 2013.

b. NHS – The Future. JK said that not much had changed since the last Meeting. SD and CF said that the Conference Calls, which could save several letters being circulated and thus save time and allow everyone to agree a decision more effectively, had started and are deemed to be a success. They had also saved hours in travelling time.

c. It was suggested that a list of the Doctors and Nurses should be displayed in Reception so that patients could see who they were due to see if their own regular GP was not available. *{Done. JSK}*. Mr Searle asked if there was a list of Specialisations of the GPs. JK explained that, although some GPs had special interests (known as GPwSI), they were, as

the name implies, generalists and needed to refer to Specialists/consultants for the more complicated cases.

2. The Aim of this Meeting is to discuss any points that the Members of the Group have concerns about. The subjects below were agreed by the Group.

3. JK explained the reason for the 14 month gap between meetings. Dr Kinsella had been away for year and Dr Thakore had been on Maternity Leave for 9 months, which meant that Dr Fardon had been the only Partner here.

4. Duty Doctor. Our Duty Doctor System had started in May 2012 and it was agreed that patients felt that it was helping them speak to and/or see Practitioners within 48 hours and on the same day in an emergency. It has also reduced the pressure on Receptionists.

5. Triage. During the summer, when 2 Partners were away, we had employed a Triage Nurse who had spoken on the phone to patients wanting an appointment to assess the need to see a doctor; many of these she had been able to manage herself. Now that we have a full complement of doctors, that task is now being carried out by the Duty Doctor.

#### 6. Appointments

a. There was discussion about the waiting time for an appointment. This has improved considerably since the Summer when, with 2 Partners away, we had had to rely on Locums who were not familiar with the patients, some of whom had then needed another appointment with one of the regular GPs. Inevitably there is a longer wait for appointments with the longer serving GPs but, as the new GPs become better known, this should even itself out.

b. *[After note: Not discussed at the Meeting]*. JK said that the Practice had tried to rearrange Reception so that, at the busiest times in the morning, we had a Receptionist dedicated to answering the telephone thus leaving one Receptionist on the desk to deal with patients face-to-face. Unfortunately, we found that we still needed 2 receptionists on the desk to deal with the numbers of patients who had come in wanting to see a doctor that day, so we were unable to spare a receptionist to be dedicated to answering the phone.

6. Practice Staff. Since the last meeting, very sadly, our long-time Receptionist Josephine Griffin died in May 2014, only a year after she had retired. Dr Yuen became a Partner on 1 September 2014, replacing Dr Datta. We have employed 2 new Salaried GPs, Drs Rimi Mukherjee and Dr Tony Banerjee, and we have appointed Miss Cerelyn Wickham as our Secretary. Fatima Sankoh and Robyn Marshall are our new Receptionists. Mrs Hussain and Mr Meghani praised 2 members of the reception staff.

7. NHS – The Future. LK explained that the future is still uncertain and insecure and GPs are experiencing a funding squeeze. Fewer GPs are willing to become partners as they find life easier as locums without the admin burden.

## 8. Any Other Business

a. Private Health. Mr Searle asked whether Private Health providers were having an impact on practices. This has not yet affected Islington practices and the signs are that those that there are in the country are not doing as well financially as expected. It was explained that Private Health Insurers will only cover Secondary Care, not Primary Care.

b. Mr Searle announced that he had been elected a Governor of the Camden and Islington NHS Foundation Trust. He explained what the Foundation Trust Governors do:

*“One big difference between normal NHS organisations and Foundation Trusts is that Foundation Trusts have Members and Governors. The Members elect the Governors. The Governors will make sure that the views of local people and service users are heard by the management of the Trust. They will also inform Members about important decisions made by the Trust.*

*“This [handbook](#) sets out the Council of Governors' committee and working group structure, with their respective terms of reference, decision-making powers, membership, and, planned dates of future meetings.*

### **What powers do the Governors have?**

*They appoint or remove the Trust Chair and non-executive directors and decide on their pay. They also approve the appointment of the Chief Executive, advise the Trust on its strategic direction, advise the independent regulator about poor performance and appoint or remove the Trust's auditors.*

*The Governors are not responsible for the day to day running of the Trust.*

### **Who are the Governors?**

*There are a maximum of 29 Governors posts:*

*6 elected by service user members;*

*5 elected by members of the public constituency living in Camden;*

*5 elected by members of the public constituency living in Islington;*

*1 elected by members of the public constituency living in neighbouring boroughs;*

*4 elected by staff of the Trust;*

*In addition there are 8 posts available for Nominated Governors appointed by stakeholder organisations such as: voluntary action groups; local authorities and local medical colleges.*

### **Contacting your Governors**

*Governors can be contacted via email or post. If you wish to email a Governor please email [trust.secretary@candi.nhs.uk](mailto:trust.secretary@candi.nhs.uk) detailing the name of the Governor you would like the email sent on to. Post may also be sent to Governors at:*

*[Name of Governor]  
C/o Trust Secretary  
4th Floor East Wing  
St Pancras Hospital  
4 St Pancras Way  
London, NW1 0PE"*

9. Next Meeting

a. We shall have a further meeting in 6 months' time.

b. There will be a Meeting of the Pan Islington Patient Participation Group at **6.00 to 8.30pm** on **Tuesday 09 December 2014** at the **Resource Centre, Holloway Road** (Next door to Waitrose). (Refreshments from 5.30pm). All are cordially invited and are asked to pass the details on to any of their friends or relatives who are registered with this or any other Islington Practice.