

**H&FGPF LIMITED**  
**Company No: 09297632 (the “Company”)**  
Minutes of the Board of Directors of the Company at  
Hammersmith Bridge Surgery  
20<sup>th</sup> May 2019  
15.00 – 17.00 Dawes Road

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- **Directors Present**

Laurie Slater (LS), Robert McLaren (RMC), Caroline Jewels (CJ), Robert Jenkins (RJ), Samia Hassan (SH), Mohammad Rashidy (MR)

- **Apologies**

Sue Spiller (SS), Robert Jenkins (RJ)

- **In attendance**

Helen Poole (HP) Caroline Durack (CD) Anna Phelon (AP)

### **Introductions and Apologies**

Apologies noted.

### **March Minutes**

The March 19 minutes were accepted as a true representation of the meeting.

### **Declaration of Interests**

CJ noted that a discussion at the ICP Board suggested that HFP were in discussion with Imperial NHS Trust in relation to pathway redesign. RMC stated that these were exploratory and talks were also been held with CLCH. He suggested that these would ultimately benefit the borough as a whole and merely reflected HFPs current state of maturity. LS concurred that such discussions need to be transparent, equitable and transparent and the opportunity should be made available to all.

### **Action: CD to add to DOI**

RMC raised that it may be prudent for the board to consider the appointment of a deputy or vice chair so as the Federation Chair is not conflicted.

### **Action: RMC to discuss with the Executive**

### **Action Log and Risk Log**

Action Log – updated

Shared Services: The Board requested a close out evaluation, including VAT and lessons learned, to come to the board, after the service has been wound down.

### **Action: HP to bring close out report to future Board**

## **Risk Log**

Risks scoring over 20 were discussed.

Line 26 – Mental Health activity within EPC; remains a high risk, HP added that the CCG had another risk of double running which might impact on this further

**Action: HP to discuss with CCG**

Line 29- Spirometry. There was a view that there was a fundamental issue re all practices trying to do everything so many services are not truly hub-based, and this could be agreed across networks. The network contract is expected to increase the hub service. RMC felt that there is a need to push back on the spirometry requirements. HP stated that she had been raising it every month at the contract meeting. RMC requested information on the need and cost per network to implement this.

**Action – HP to advise at nextboard**

Line 44 - Equipment/ Training for EPC.The Board requested assurance re next years training budget for EPC, HP advised that no commissioning intentions had been published yet but that she would continue to flag with the CCG.

Line 48- AP to amend to reflect to include the wider system stability.

**Action – AP to amend**

## **Finance Pack**

The finance pack was presented by the Executive. Healthy reserves in both companies. Overheads continue to be a growing burden and the Executive are looking at ways of reducing these including staffing, premises and support services. RMC discussed that there are savings within historical grants which is reflective of how conservative the Federation is in relation to how it manages its finances. These contingency pots are how the companies have managed to survive and cross subsidize each other, whilst delivering against expected outcomes.

RMC noted that the year-end accounts were previous years. CD reported that the finance team had yet to commence work on this year.

**Action – RMC to discuss with DC**

HP updated on the accountancy options as per the tabled paper. Only one of the two companies approached had offered a quote for the work required. The Board had experience of both firms. RMC requested additional amendments to the paper to include a comparator of like for like monthly costs, bimonthly costs and cost of virtual attendance. He requested that payroll, company secretary functions and shareholders also be reflected.

**Action: HP to amend the paper for the next board**

## **VAT**

LS suggested that the Federation role would be stronger if the VAT implication was clearer.

CD/ HP will again discuss with other federations as to how they manage their VAT. It was confirmed that Federations can only hold the network funding if they hold an APMS contract or as a pass through from the holding practice. RMC suggested that the federation could recruit and employ the additional staff for practices.

**Action: Exec to seek further guidance on the VAT issue**

### **Update on the Primary Care Networks**

RMC provided an update on the current PCN formation discussion. He explained that four practice potentially might be displaced. He has been offering support to the newly appointed Clinical Directors, including Matt Noble- from GP at Hand., who are awaiting confirmation from NHSE re their Network status. No Network can be approved until there is full borough coverage. It was agreed that PCNs needed to be a fixed agenda item.

#### **Action: CD to add to agenda as a rolling item**

The Board enquired as to what the ongoing role of the Federation may be. RMC said we need to know more about what the networks want us to do, in addition to what we can offer. CD reiterated that it was difficult to calculate the offer to networks by service line, (as per the case of the PCDMs) as we were unable to calculate the offer until we had an indication of what they may desire. There was then a discussion re the potential for individual practices not wishing to support the federation with a 10% top slice. It was agreed that the Executive would consider what the offer could be.

#### **Action- Executive to suggest the practice offer.**

### **GP at Hand**

RMC has been in discussion with Dr Matthew Noble. He aims to attend the board on 17<sup>th</sup> June. The Board are minded that we would only offer federation services to H&F registered list size (residing in H&F). HP suggested that shareholding agreements and list size may have changed over time and we would need to revisit as part of our board constitution review.

### **New Board Constitution**

RMC requested that the meetings return to being practice based. He suggested that both the current directors and newly appointed Clinical Directors attended the next board to discuss future composition and roles.

#### **Action – CD to ensure board meetings are practice facing.**

### **AOB**

RMCC shared that he had attended a meeting re funding for social prescribers that could generate additional income from PCNS. This is supported via MacMillan Funding. The federation will remain engaged.

#### **Action – Fed to remain involved with Macmillan Bid**

LS asked what the future of the OHH services were. HP stated that we did not know at this time as commission intentions had not been shared.

LS questioned as to the ongoing role of the Data Controller.

#### **Action- Exec to consider data controller function**

CD reminded Board Directors to forward their invoices to ensure recompense for attending the Board.

#### **Action- Directors to forward invoices**

### **Next Meeting**

17<sup>th</sup> June, 2019