

# **GP SUB-COMMITTEE OF NHS Lothian Area Medical Committee**

Monday 11<sup>th</sup> February 2019

**7.30pm**

Novotel Edinburgh Park Hotel, 15 Lochside Avenue, Edinburgh EH12 9DJ

Chair - Dr AD Begg

## **MINUTES**

**1. Apologies** – Dr Amy Small, Dr Euan Alexander, Dr Helen Faulding-Bird, Dr Tracey Gillies, Dr Brian Cook, Dr Nigel Williams, Dr Elizabeth Murray, Dr Rachel Hardie, Dr Elaine Duncan

**2. What hats do you wear?**

In order to keep our information up to date, Chair informed attendees that a spreadsheet was being circulated during the meeting showing details of which committees each member stood on, and asked attendees to update as required.

**3. Minutes of last meeting** held on 14<sup>th</sup> January 2019.

The minutes were approved.

It was requested that the following additions were made to the minutes;

- Section 3, Presentation on Flow Centre - GP Sub Committee also requested that specialties not currently covered by the Flow Centre should be considered and included going forward.

- Section 4, Recent Winter SLAs – DS & ADB are meeting in March to review winter SLAs for both In Hours and OOH and will feed back to GP Sub following that meeting.

**4. Matters Arising/Actions from last meeting**

**4.1 OOH SERVICES UPDATE.**

JE & ST met to discuss the OOH service, with the recognition of the close links between In Hours and Out of Hours working and the increasing pressures on both services. ST highlighted that the current OOH service is understaffed, with staffing remaining an ongoing struggle and expressed her appreciation of GP Sub and LLMC support of the current position. ST made attendees aware that it was likely In Hours GPs could begin to be impacted by the overspill from OOH

due to the high levels of demand meaning they cannot see all patients within the OOH window. JE highlighted our role as representatives of all GPs and as a result we plan to include a LUCS representative on LMC – ST is taking this forward.

**ACTION:ST**

It was noted that Glasgow LMC hold a meeting to specifically look at OOH services, and it was proposed that we will look to do the same later this year. More details to follow.

Chair shared how impressed he was during a recent visit to LUCS.

MF queried whether it was worthwhile sending information on the unfilled OOHs sessions to all PMs with the aim of increasing awareness of all GPs of the vacancies. ST added that work was currently ongoing which looked to improve T&Cs for GPs working for LUCS in particular exploring opportunities without superannuation which ST acknowledged was an important factor deterring many GPs from undertaking additional work.

The strain experienced by the staff currently working in OOHs was recognised, and attendees acknowledged the need to get as many people on board as possible.

**4.2 DIABETES MCN UPDATE.**

Chair summarised his recent attendance at the MCN forum where the early detection and prevention of diabetes was discussed. Chair referred to the 'Framework for the Prevention, Early Detection and Early Intervention of type 2 Diabetes' paper that was circulated in advance and asked the committee for their views.

There was very positive feedback overall on the management of obesity/weight management component, however concerns were raised around the approach to testing/screening, the GP impact factor and how this work would be funded.

SH highlighted the reference to GP Clusters and how they are intended to support the implementation of the framework, and raised concerns around the limitations on this resource.

CM queried whether, as a national document, this paper had been discussed with Scottish GP Committee to which the Chair responded that it had not. It was agreed that this should be raised at the SGPC Exec meeting.

**ACTION : LMC OFFICE**

**4.3 SCHOOL NURSING SERVICES UPDATE.**

JE updated attendees on the response from Sally Egan's office confirming that the updates discussed at the January meeting do not apply to fee-paying schools.

## **5. Chairs Business**

### **5.1 DETECT CANCER EARLY PRESENTATION**

ADB summarised the key messages from a recent presentation given by Lorna Porteous and Alison Milne to Chairs Group.

Recent information on symptomatic qFIT testing has been sent to all practices. There is currently no change to the work required by GPs.

There remains no funding for direct access for GP requests for CT scanning, however this is being actively pursued following an earlier successful trial.

A number of events are planned in order to reach out to GPs and also raise public awareness.

Scottish Referral Guidelines and summary of key changes document was also discussed and feedback was provided. Concerns were raised around some of the guidelines and how these could be framed in a realistic medicine context.

CM informed attendees that she is involved in ongoing meetings with David Maxwell and Lorna Porteous, however more work is needed before bringing back to the committee.

### **5.2 MINOR SURGERY SERVICES CAP**

IM summarised the paper issued in advance and asked attendees for their thoughts on whether the current approach needs to be reviewed.

The option of removing the cap but only carrying out this work through centres or clinics was put forward. This would remove any personal incentive to carry out higher levels of this work while still removing pressure on other areas.

Concerns were raised around the perceived lack of trust in GPs, and recognition was given of the levels of work carried out in this area that otherwise would necessitate referral to dermatology or plastic surgery.

It was agreed that a review should be carried out at a suitable time.

**ACTION : NW TO LEAD**

## **6. CTACS Group update**

DS summarised the key points from the papers issued in advance, highlighting that their main purpose was to underpin key activities for CTACS, with an overall aim to create capacity within practices. This was positively received and the sharing of good practice was acknowledged.

Chair asked the committee whether the remit of the Short Life Working Groups seemed acceptable, to which there was a general consensus of approach.

SH raised a concern around staffing issues, particularly around bringing new staff on board and the line management of shared resources across practices.

## 7. Brexit

AMcN summarised the work currently underway to highlight the priority issues in advance of Brexit.

IM raised a concern that immunisations for under 2s are not priority, and this concern was shared by the committee.

SH suggested that routine contraception and LARC should be prioritised.

Chair suggested we update the paper to highlight the negative impact of adverts that encourage patients to attend their GP at a potentially busy time.

AMcN added that this activity is ongoing and that a further update will follow.

## 8. GMS Oversight Group

In addition to the draft minutes issued in advance, DS provided further update on a number of areas;

Vaccination Transformation Programme – a session is planned to focus on 0-5 year olds and flu

Workforce – a meeting is scheduled to review overall recruitment and training and development plans.

Pharmacotherapy services – recruitment is now underway in all HSCPs.

RM raised concerns that vaccination targets haven't been reached in some of the practices and questioned why this is the case and how this will impact funding within practices.

ADB highlighted that this will be a national decision and that we await further information on funding.

Chair requested that Clinical directors of each HSCP give updates on their improvement plans at the June GP Sub-Committee meeting.

**ACTION – JE to inform Clinical Directors**

**9. Anti-psychotic Safety Review.** Chair provided an update in TG's absence. Dr Andrew Watson is leading some research in the prescribing and monitoring of high dose anti-psychotics and the middle group of lower dose anti-psychotics that psychiatrists initiate. Chair has scheduled a meeting with AW to discuss areas of responsibility

Chair will bring a further update to GP Sub following the meeting with Andrew Watson.

## **10. AHP MSK Pathways work**

DC provided an update on the quarterly meeting where various MSK workstreams including low back pain, and foot and ankle were discussed. DC informed committee that a pathway for neck pain is being considered for a future workstream.

DC highlighted the desire to bring more people onboard, and the aim of achieving 4 week waiting targets for physio and orthotics.

Feedback on any specific areas of this work is welcomed via email to Wendy Johnson ([wendy.johnson@nhslothian.scot.nhs.uk](mailto:wendy.johnson@nhslothian.scot.nhs.uk)) & Phil Ackerman ([phillip.ackerman@nhslothian.scot.nhs.uk](mailto:phillip.ackerman@nhslothian.scot.nhs.uk)).

JC raised an issue with the MSK phonenumber regarding what referrals they will accept. It doesn't appear to be working in the way it was marketed and clarity is needed around the service that it offers. DC confirmed that this was raised at a recent meeting and that MSK group will be issuing further advice to GPs.

JT shared that they now have evaluation of the CWIC service in Musselburgh and stated that the evaluation has shown a reduction in onward referral rates - this will be brought to a future meeting.

## **11. GP 'Stay in Practice' scheme**

Chair brought the 'Stay in Practice' scheme to the attention of members. The paper issued in advance was noted, and it was suggested that this could be shared with the Doctors Support and Advisory Group.

**ACTION: ADB to raise with NW**

## **12. Faculty Development Alliance**

Chair highlighted the Faculty Development Alliance and a one day, free course covering workplace based assessments. More sessions will be set up during the year.

### **13. Medical Secretaries' Business**

IM highlighted the forthcoming 6% rise in employers' superannuation contributions. It is anticipated that this will be funded by Scottish Government, and discussions are ongoing to determine the technicalities around how this happens. Further updates will be provided when more details are known.

### **14. AOCB**

None

**Date of Next Meeting** – Monday, 11<sup>th</sup> March 2019, 7pm. **Please note change of time.**

#### Future meeting dates

Monday, 8 April  
Monday, 13 May  
Monday, 10 June  
Monday, 12 August  
Monday, 9 September  
Monday, 14 October  
Monday, 11 November  
Monday, 9 December