GP SUB-COMMITTEE OF NHS LOTHIAN AREA MEDICAL COMMITTEE

Monday 19th December 2022 **7.30pm** Virtual meeting (MS Teams)

Chair - Dr Iain Morrison

MINUTES

Attendance: Dr Iain Morrison, Dr Neil MacRitchie, Dr Annie Lomas, Dr Euan Alexander, Dr Gordon Black, Dr Stuart Blake, Dr Peter Cairns, Dr Elena Del Vescovo, Dr Jenny English, Dr Morgan Flynn, Dr Fiona Ford, Dr Andrew Forder, Dr Rebecca Green, Dr John Hardman, Dr Clementine Johns, Dr Alexander Kelly, Dr Hazel Knox, Dr John Magill, Dr Maria Marecka, Dr Ramon McDermott, Dr Laura Montgomery, Dr Catriona Morton, Dr Rory O'Conaire, Dr Nick Payne, Dr Katherine Robertson, Dr Catherine Smith, Dr Shelagh Stewart, Dr Elizabeth Strachan, Dr Jane Sweeney, Dr Ros Wight, Dr Jeremy Chowings, Dr Hayley Harris, Ms Jenny Long, Ms Alisson Stewart, Mrs Nicola Smith

Apologies – Dr Colin McArthur, Dr Jane Marshall, Dr Elaine Duncan, Ms Alison McNeillage, Ms Tracey Gillies

Welcome – Dr Alexander Kelly, newly appointed West Lothian representative
Ms Susanne Crichton, Lothian Work Support Services
Ms Laurie Eyles, Dietetic Service Lead, NHS Lothian
Ms Audrey McGregor, Weight Management Lead, Dietetics, NHS Lothian

Chair opened the meeting and warmly welcomed guests and committee members.

1. Presentation- Lothian Work Support Services

Susanne Crichton gave a brief presentation to committee on the services offered by Lothian Work Support, Lothian's free specialist vocational rehabilitation service to help individuals remain in or make a healthy return to work.

The service is currently experiencing a drop in referrals and are keen to hear what they can do to help support GPs.

Committee fed back their positive experiences of this very valuable and useful service and that a reminder of the service should be provided across Lothian to increase visibility.

It was agreed that this would be included in the Weekly Distribution issued by the GMS Contracts team so that practices can share with their wider teams.

A copy of the presentation slides will be issued with approved minutes.

2. Presentation – Liraglutide in Lothian Weight Management Services

Laurie Eyles and Audrey McGregor gave a brief presentation to committee on the use of Liraglutide within Lothian Weight Management Services.

It was noted that while Liraglutide was already in use for diabetes treatment, it has now been accepted within NHS Scotland for restricted use in support of weight management.

This was welcomed as good news for weight management patients in Lothian and it's expected that approximately 200 patients per year will be referred to the service, with Tier

3 and "Let's Prevent" pre-diabetes waiting lists being triaged into the programme where appropriate.

The proposed pathway was shared with Committee. It was welcomed that this will be managed by medical prescribers rather than through practices as, due to the numbers involved, there is limited opportunity to build and maintain knowledge within individual practices.

It was noted that while ongoing costs need to be considered, the potential benefits are significant and it will be important to see how this develops and integrates into Primary Care.

Laurie and Audrey welcomed any further questions and they can be contacted via email (laurie.eyles@nhslothian.scot.nhs.uk, audrey.mcgregor@nhslothian.scot.nhs.uk).

Further information can also be found on NHS Lothian's Weight Management site Adult Weight Management and Type 2 Diabetes Prevention Service – NHS Lothian | Our Services

3. Minutes of the last meeting 21st November 2022

The minutes from the previous meeting were approved.

4. Matters Arising / Actions from last meeting;

4.1 - **Office** to circulate details of the pay announcement to Lothian practices. **Update:** Details of the DDRB pay announcement were issued to Lothian practices on 22nd November. However we are awaiting any further advice in light of the recent NHS Scotland pay offer. **CLOSED**

5. Patient Registrations/Virtual Practice

General practice is under extreme pressure.

Committee were updated on the current position in South East Edinburgh where there are a significant number of practices with closed lists. As a result, other practices are being allocated patients who are significantly outside practice boundaries, creating a disproportionate workload for those practices already battling to keep their lists open. This approach brings inefficiencies through increased requests for house calls, further diluting the effectiveness of general practice. It was noted that work continues in an attempt to allocate to practices as close to patient area as possible.

There is now a shortlist of candidates for Gracemount practice, with interviews due to take place in January. It was noted that all applicants are aware of the need to establish a stable practice within the area and it is hoped that the patient list will re-open in February with the practice moving to 2c status.

It is hoped that the patient list in Danderhall may also reopen. Conversations are continuing and more will be known in the New Year.

While the proposed City Practice previously discussed is not the preferred model within Lothian going forward, it was acknowledged that this may need to be considered further depending on the level of need as a result of the massive population growth in Lothian and the significant lack of appropriate Government funding.

Committee asked for clarity around the level of awareness with NHS Lothian Board of the current extreme challenges being faced within General Practice, and it was noted that this is being given recognition however given the current financial challenges, there is no immediate solution.

Committee asked for clarity on the action the Board have/will take as a result of their awareness of the current position.

6. Physician Associates/NMR X-Ray Referral process

The recent "Advice note – Referrals for x-rays from GP practices" dated 5th December was shared in advance of the meeting.

In summary, it states that referrals from staff who aren't GPs or trained and entitled as non-medical referrers will not be accepted by the x-ray departments. This is an IRMER governance issue and GPs take responsibility for any requests made under their name. Ideally, all staff referring should do this under their own login - this would significantly improve the governance around the referral process.

If additional staff require non-medical referrer training, if they meet the training requirements of the protocol they will be referring under, Radiology will help ensure they receive appropriate training.

Committee agreed that this was a pragmatic approach and we will do our best to see that colleagues are trained up as required.

7. Group A Streptococcal Increases

Committee shared its severe disappointment at the lack of public communications around the recent rise in Group A Streptococcal infections, and the crippling effect being felt by GP practices as a result. On the day of this meeting there were record numbers of patients in practices across Lothian, and while some were genuinely unwell cases, there was concern that this could also lead to huge numbers of patients who would usually be managed confidently by most parents. Further Public Health Scotland guidance has increased the pressure and the current guidance to practices to see all of these children and prescribe antibiotics in most cases is unsustainable. Committee's concerns for the sustainability of the Out of Hours service over the festive period if this level of demand continues was noted.

There needs to be better messaging to the public in conjunction with pragmatic, deliverable guidance to the profession.

Current issues with antibiotic availability across Lothian was also highlighted.

8. Property Compliance Requirements

The "General Practice Property Statutory and Legal Compliance" letter recently issued to practices was shared in advance of the meeting.

Committee's full support of practices to ensure compliance with building regulations was acknowledged, however concerns relating to the cost of complying with these regulations were raised.

Financial support to assist practices with these costs are at the discretion of NHS Lothian Board and it is hoped that NHS Lothian Board will look favourably on practices to facilitate

this. Without such support, the significant cost to practices may result in them taking some time to gather this information together, which may then be at the cost of other services.

Committee queried whether Lothian Estates have a role going forward in working with practices to carry out these regulatory checks.

9. Hot Clinics

It was noted that more Hot Clinics have been set up, although recent feedback would suggest that this is not well known within practices.

Better signposting at Flow Centre level is being looked at, and Committee were reminded to consider this option in these times of increased pressure.

10. **GPAS**

The November report was shared in advance. In summary, there is more red being reported across the board compared to October, and it was highlighted that where there are lower number of clinical contacts this was a result of reduced capacity within practices rather than lower levels of demand.

Committee expressed their thanks to all practices who are engaged in this, while the lower returns from some areas, most likely driven by the difficulties being faced by some practices under extreme pressure, were also acknowledged.

Committee agreed that the report could be shared with Scottish Government (Michael Taylor).

11. Medical Directors Business

11.1 – Representative movements;

i) West Lothian representative

- Committee welcomed Dr Alexander (AJ) Kelly in the role.

ii) PLIG representative

 It was noted that, following Dr Catriona Morton stepping down as GP Sub representative on this committee, Dr Jenny English will now take on the GP Sub rep role at PLIG.

iii) GPPC Chair vacancy

- It was noted that the previous Chair of GPPC has stepped down, however despite a request being issued to all GP reps on the committee, no one feels able to take on the extra requirements of the role without appropriate funding (current funding covers meeting attendance only but not the additional activities before/after the meeting).

12. **AOCB**

12.1 **Urgent Results Delay** – Following on from discussions at PLIG, lab staff are reporting long delays of up to 40 minutes when calling practices with urgent results. As a result some practices have provided a separate telephone number for this work, or the option to email these to practice clinical mailboxes was also suggested – this would be a safer transfer of

result but would potentially require receipt of email. Any thoughts from committee to come to the office.

AP - Office to discuss the current delay in relaying urgent results to practices and look to propose a suitable solution.

Chair closed the meeting by wishing everyone on Committee a very merry Christmas. It's been a pleasure to work together over the year and we look forward to good collaborative working in 2023.

Meeting closed.

Date of next meeting - Monday 23rd January 2023 via MS Team

2023 Meeting Dates (last Monday of each month unless highlighted)

Monday 27th February (Novotel) Monday 27th March Monday 24th April

Monday 29th May (Novotel)

Monday 19th June (3rd Monday)

NO JULY MEETING

Monday 28th August (Novotel) Monday 25th September

Monday 30th October

Monday 27th November (Novotel) Monday 18th December (3rd Monday)