GP SUB-COMMITTEE OF NHS LOTHIAN AREA MEDICAL COMMITTEE

Monday 16th December 2024 **7.30pm** MS Teams

Chair - Dr Andrew Forder

MINUTES

Attendees - Dr Andrew Forder, Dr Annie Lomas, Dr Neil MacRitchie, Dr Euan Alexander, Dr Gordon Black, Dr Stuart Blake, Dr Peter Cairns, Dr Michelle Downer, Dr Jenny English, Dr Fiona Ferguson, Dr Rebecca Green, Dr Alexander Kelly, Dr Hazel Knox, Dr Joanna Loudon, Dr Jane Marshall, Dr Douglas McGown, Dr Laura Montgomery, Dr Iain Morrison, Dr Catriona Morton, Dr Rory O'Conaire, Dr Katherine Robertson, Dr Kim Rollinson, Dr Suzy Scarlett, Dr Joanna Smail, Dr Deborah Strachan, Dr Elizabeth Strachan, Dr Jane Sweeney, Dr Laura Tweedie, Ms Jenny Long, Dr Jeremy Chowings, Ms Alison McNeillage, Dr Hayley Harris, Ms Elaine Weir, Mrs Nicola Smith

Apologies - Dr John Hardman, Dr Ramon McDermott

Welcome - Dr Tara Womersley, Craigmillar Medical Practice (observing)

Dr Faye Porter, GP & National Teledermatology Project

Dr Fergus Donachie, ANIA (Accelerated National Innovation Adoption)

Mr Craig Millar, ANIA (Accelerated National Innovation Adoption)

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

1. Presentation: Digital Dermatology

Members of the ANIA Digital Dermatology Project Team gave a short presentation on the Digital Dermatology programme and the planned roll out across Lothian.

GPs will be able to capture images securely through the Consultant Connect app which will enable more informative referrals and it was highlighted that the app will not retain any images or data on the users device. This approach has been endorsed by all Health Board Chief Executives nationally and is already being used in other health boards.

A soft Go-Live is currently underway in Lothian, involving 5 practices. The Lothian ANIA group will meet mid-January to hear feedback from that initial process before deciding on a plans for wider rollout.

It was noted that while practices are encouraged to attach photos to enable more effective triage of patients, it was agreed that this should not be compulsory due to a number of factors including use of personal mobile phones and inconsistent wifi service across NHSL. Any further discussion around this would need to be brought to GP Sub-committee for a decision.

Overall, committee agreed this was a positive step and thanked the team for taking the time to present.

2. Minutes of the last meeting 25th November 2024

The minutes of the previous meeting were approved.

3. Matters Arising / Actions from last meeting;

- 3.1- Office to hold further discussions with S McBurney/Pharmacotherapy team to look at a different approach to resourcing the COVID Anti-virals service. **Update:** The most recent meeting was cancelled. **c/f**
- 3.2 **Office** to raise concerns around referrals for pessary removal at next Lothian Interface Group meeting, and agree how to take things forward. **Update:** This was discussed at the most recent LIG meeting and Caroline Whitworth has taken an action to discuss with this further with Gynaecology.

Alternative options such as the possibility of GPs with Special Interest running clinics within localities were also discussed. A further update will be given following the next LIG meeting. **ONGOING**

- 3.3 **AL** to raise concerns around Lothian's approach to suspected squamous cell carcinoma at the next Lothian Interface Group meeting. **Update:** This was discussed at the most recent LIG meeting where it was noted that, as this approach deviates from national guidance, Dermatology are accepting that the risk and responsibility rests with them. **CLOSED**
- 3.4 **Office** to feedback committee's views on the proposed District Nurse Referral Pathway to Pat Wynne. **Update:** This has been fed back. It was also agreed that the roll out of the new pathway would take place in January. **CLOSED**

4. **Dermatology Update**

The recent communication to practices from Dermatology, circulated as part of the Weekly Distribution of 5th December, was shared with committee in advance. The document gives an overview of the challenges currently being faced within Dermatology, the actions they are taking as a result and what this means for patient care.

While it would be preferrable to have a solution to this, committee welcomed the transparency provided but strongly voiced their significant concerns around the potential for patient harm as a result. While acknowledging that a number of services are very stretched, it was noted that this system has been broken for a significant time with no apparent action being taken to fix it, and committee therefore called on NHS Lothian Board to escalate this as a priority in order to stop patients coming to harm. It was also noted that the current "Pause and Assess" strategy was taken as a direct result of the 7% savings target placed on NHS Lothian as a result of Scottish Government's 2023 budget announcement.

The service has been unable to recruit consultant dermatologists, and at the most recent Lothian Interface Group meeting it was highlighted that GPs would be happy to be considered as part of the solution if some of this funding could be made available to run a pilot for GPs with Special Interest in order to reduce the considerable waiting list.

The depth of committee's concerns were acknowledged, and the Deputy Medical Director of Primary Care agreed to raise these through the official reporting lines.

5. **GP Enhanced Service Programme 2025/26**

The draft 2025/26 GP Enhanced Services (ES) contracts were circulated to committee in advance for review.

It was noted that the ES funding envelope within Lothian is £14 million for the year (£9.5 million from Scottish Government with an additional £4.5 million from NHS Lothian), although it was acknowledged that, as there is no inflationary uplift to the SG funding, the actual value is reducing. It was also noted that despite there being a lot of pressure from NHS Lothian to make savings on ES, it has been agreed that the funding will remain the same although no uplift is available. Committee appreciated the work done by the Primary Care Directorate to maintain the ES budget.

Following a recent annual review, a simplified package for 2025/26 has been proposed – 5 ES will be decommissioned/moved into other ES and their associated funding reinvested into 3 priority services; High Risk Prescribing and Monitoring Service, the Drug Dependence Service, and Very Long Acting Reversible Contraception (VLARC). The Care Home Lead Practice ES (previously Anticipatory Care (Care Home) is also subject to larger change, with the remaining ES remaining broadly the same.

Considerable discussion followed and committee provided feedback on the draft contracts. The key points raised were:

<u>High Risk Prescribing & Monitoring</u>: While the 2-tier payment was appreciated, there was confusion around the categorisation of Tier 1 and Tier 2. Concerns around the loss of set-up costs and lack of acknowledgement that Methotrexate is considerably more complex than the others.

<u>Care Home Lead Practice</u> – The flat fee seems inequitable and would present a considerable financial cost to lead practices of larger nursing homes. Concerns around the removal of any funding for non-lead practices. It was agreed that a different approach within the same funding envelope could be considered.

VLARC: While the proposed uplift in payment was appreciated, it is still under-priced both in terms of cost to the practice and also in comparison to other boards.

Alcohol Brief Interventions: General confusion as to why this is being decommissioned in Lothian when it is a key element of Scottish Government's strategy to reduce alcohol-related harm.

Diabetes Type 2 & COPD Pulmonary Rehabilitation: Concerns around the likely impact on Secondary Care if this is decommissioned/moved into QI SESP with no additional funding.

Adults with Learning Disabilities: Concerns that, as this will move into a new NHS Lothian delivered Learning Disability annual health check service, the most deprived practices will be impacted the most.

Following further discussion at the LMC meeting immediately following, it was agreed that Chair would arrange to discuss further with Primary Care directorate.

Chair thanked everyone for their hard work and contribution to the discussion around what is a very challenging situation.

6. **GPAS**

The November report was shared in advance of the meeting and it was noted that the position has remained mainly stable since October, with South East Edinburgh and West Lothian seeing a downward trend in status but all other areas remaining the unchanged.

Once again, the supporting comments provided by practices are very helpful in evidencing the challenges being faced around workforce, workload and ongoing financial pressures, and committee thanked practices for continuing to complete regular data returns.

7. **Medical Directors Business**

None

8. **AOCB**

- 8.1 Cegedim Administration: Committee were informed that Cegedim has recently placed its UK branch, IMPS, into administration. While there is currently no formal update to pass on, this is potentially significant for Scotland with a number of GP IT Vision migrations yet to be completed. It is hoped that a buyer will be found and daily meetings are taking place at a national level, and a further update will follow when any decisions have been made.
- 8.2 Frailty LES: Committee were informed that Scottish Government have agreed £1.19 million of additional funding for 25/26 to enable NHS Lothian to test a new Frailty Enhanced Service. This will equate to approximately £11,500 of extra funding for an average sized practice, and the news of this transfer of funding to support the work of the expert medical generalist was well received.

Chair closed the meeting by wishing colleagues a happy festive season.

Date of next meeting - Monday 27th January 2025 on Teams

2025 Meeting Dates;

Monday 24th February

Monday 24/3 March - Novotel

Monday 28th April

Monday 26th May

Monday 23rd June - Novotel

NO JULY MEETING

Monday 25th August Monday 22nd September - **Novotel**

Monday 27th October

Monday 24th November

Monday 15th December (3rd Monday) - Novotel