

# GP SUB-COMMITTEE OF NHS Lothian Area Medical Committee

Monday 15<sup>th</sup> March 2021  
**7.30 pm**  
Virtual meeting via MS Teams

Chair - Dr Iain Morrison

## MINUTES

**Attending** – Dr Iain Morrison, Dr Jenny English, Dr Neil MacRitchie, Dr Euan Alexander, Dr Robin Balfour, Dr Drummond Begg, Dr Carl Bickler, Dr Gordon Black, Dr Stuart Blake, Dr Peter Cairns, Dr Elaine Duncan, Dr Morgan Flynn, Dr Andrew Forder, Dr Kerri Greene, Dr John Hardman, Dr Clementine Johns, Dr Annie Lomas, Dr Ramon McDermott, Dr Laura Montgomery, Dr Catriona Morton, Dr Rory O’Conaire, Dr Nick Payne, Dr Hamish Reid, Dr Katherine Robertson, Dr Amy Small, Dr Catherine Smith, Dr Elizabeth Strachan, Dr Jane Sweeney, Dr Jon Turvill, Dr Laura Tweedie, Dr Ros Wight, Mr Ryan Addison, Ms Tracey Gillies, Dr Hayley Harris, Ms Alison McNeillage

**Apologies** – Ms Sandra Allan, Mr David Small, Dr Nigel Williams

**Welcome** – Dr Hayley Harris, *interim Clinical Director, Lothian Unscheduled Care Service (LUCS)*

Chair opened the meeting and warmly welcomed committee members, along with Dr Hayley Harris, the newly appointed interim Clinical Director of LUCS.

### 1. **Minutes of last meeting 15<sup>th</sup> February 2021, for approval**

The minutes from the previous meeting were approved.

### 2. **Matters Arising/Actions from last meeting**

2.1 **LMC office** to raise with SGPC the need for more consideration of GP cover requirements (both in and OOH) to be given at the planning stage for care homes and community hospitals. **Update:** This is a live issue and has been fed back through SGPC Executive. We hope there will be greater direction and consideration on care home provision going forward. CLOSED

2.2 **ALL:** Any further suggestions regarding how best to spend the £25k Clinical Pharmacist funding should be sent to LMC office as soon as possible. **Update:** No further suggestions received, therefore it will be proposed that this funding is used to support development of pharmacists across Lothian. CLOSED

2.3 **LMC office** to feedback concerns to NES around late notice requests to distribute funds across practices with no option to carry over. **Update:** Chair is meeting with Amjad Khan later this week to discuss a number of NES-related topics of which this is one. CLOSED

### 3. **COVID Vaccine Programme Update**

An update on the vaccine delivery programme across Lothian was provided.

The national mass vaccine campaign continues to gather pace, and 2<sup>nd</sup> doses will start shortly. More information on the GP involvement in 2<sup>nd</sup> doses will be covered at the Lothian-wide Zoom meeting on the evening of 17<sup>th</sup> March.

The Exceptional Pathways for patients not picked up by the mass campaign have now been produced and shared across both primary and secondary care. The pathways are straightforward and easy to refer to, and Committee expressed their thanks to everyone involved in their production.

#### **4. Evidence of vaccine**

The request for evidence of a patient's COVID vaccinations was discussed.

Currently the EMIS system has a relatively simple web request option, however there is nothing similar currently available on the Vision system. It was hoped that TURAS would provide a suitable solution for use across all practices however nothing is currently available. This has been raised at the highest level nationally and is something that the office will continue to take forward.

In the meantime, a patient can request a targeted Subject Access Report (SAR) in order to obtain this evidence. This is not chargeable by practices and needs to be provided within 30 days. However should practices find that they are receiving high levels of these requests which they will struggle to process within this time frame, they can issue an immediate letter to the patient to extend the timeline from 30 days to 90 days.

#### **5. GMS Remobilisation Group update**

Draft minutes of the meeting of 23<sup>rd</sup> February were circulated in advance. Key points from the meeting of 9<sup>th</sup> March were also highlighted to Committee;

- Remote Blood Pressure monitoring is being scaled-up, and a request has been made for funding to keep this going for the next 18 months. A decision is expected by the end of March.
- Information on the first 2 shipments of the 2<sup>nd</sup> dose vaccine supply has gone out to practices and we hope to give more detail on the 17<sup>th</sup> March evening call.
- A "Flu Debrief" led by Pat Wynne is expected in mid April.
- Enhanced Services in Q1. Practices should continue to do what they can, recognising that clinically important work is priority. Data should continue to be collected although there will be no link between this and payment in Q1.

It was noted that the GMS Remobilisation Group meetings have been very worthwhile throughout the pandemic but may now be coming to the end of their useful life. Restarting some of the other previously run groups, e.g. Primary Care Joint Management Group, is now being considered.

#### **6. Future of GP Sub 2018 Contract Representatives**

The current contracts for GP Sub Contract representatives finish on 31<sup>st</sup> March 2021, and with no confirmation as yet from Scottish Government as to whether this funding will continue into 2021/22, the posts will end on that date.

As a result, subject to approval of the proposed constitutional change at the forthcoming LMC AGM, we will move to GP Sub Committee-elected representatives for each of the 4 HSCP areas

across Lothian, who would then become GP Sub Contract representatives if further funding is approved by Scottish Government.

It was noted that these posts have been crucial to the 2018 contract, and should there be a change in personnel, the need for a suitable transition period to allow for transfer of learning was agreed.

## **7. Medical Directors Business**

### **7.1 Children's Phlebotomy requests**

It was noted that Committee had previously discussed this issue at length prior to the COVID pandemic however concerns were raised around the current level of service being experienced.

The earlier open access phlebotomy service at Sick Kids has now been replaced by a process where parents need to phone in advance for an appointment, with current wait times now sitting at approximately 6 weeks compared to 1 week for the earlier process. Requests for emergency appointments are now approximately 15 – 18 days.

Committee agreed that the current timelines were not acceptable and that this should be raised further with the relevant team at the Royal Hospital for Children and Young People, while recognising that they are currently part way through a move to the new site. It was agreed that it would be helpful to review the current service and also think about the service they want to provide from their new premises.

**AP: TG** to raise Committee concerns regarding Children's phlebotomy service and wait times with specialist area at Royal Hospital for Children and Young People.

## **8. AOCB**

None

The meeting closed.

**Date of next meeting – Monday 19<sup>th</sup> April 2021, 7.30pm**