# **GP SUB-COMMITTEE OF**

# NHS LOTHIAN AREA MEDICAL COMMITTEE

Monday 17<sup>th</sup> May 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 Carl Bickler, Dr Gordon Black, Dr Stuart Blake, Dr Elaine Duncan, Dr Andrew Forder, Dr Kerri Greene, Dr John Hardman, Dr Clementine Johns, Dr Annie Lomas, Dr Waheed Mahmood, 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 Shelagh Stewart, Dr Elizabeth Strachan, Dr Jane Sweeney, Dr Laura Tweedie, Dr Ros Wight, Mr Ryan Addison, Ms Tracey Gillies, Mr David Small

Apologies – Dr Drummond Begg, Dr Peter Cairns, Ms Alison McNeillage, Dr Jon Turvill

#### Welcome – Stephen Glancy, Consultant Radiologist

- Phil Ackerman, Consultant MSK Physiotherapist
- Karen Outram, newly-appointed MSK Pathways Lead
- David White, Edinburgh HSCP
- Jamie Megaw, Midlothian HSCP

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

## 1. Radiology and Lower Back Pain Pathway update

Stephen Glancy gave a short Radiology presentation to Committee which summarised the recent work of the Primary Care Imaging (PCI) Group, wait times, what's new in Radiology, and low yield, resource intensive tests.

Phil Ackerman then provided a brief overview of the Lothian Integrated Back Pain Service, which covered the development of patient and clinician resources, updates to NICE guidelines for managing low back pain and sciatic, and MRI.

The presentations were very well received by Committee and copies of the slide presentations will be circulated to all practices with the approved meeting minutes.

## 2. Minutes of last meeting 19<sup>th</sup> April 2021, for approval

The minutes from the previous meeting were approved.

## 3. Matters Arising/Actions from last meeting

3.1 – AL to raise Secondary Care referrals process/RefHelp at next LIG meeting to

improve awareness/education within secondary care (including nurse specialists). **Update**: No further LIG meeting has taken place as yet, however communications have been drafted to promote RefHelp within secondary care, along with a helpful reminder of the process.

3.2 – **AL** to raise proposed changes to vitamin D testing and ordering process at the next PLIG meeting. **Update**: No further meeting held yet. Carry forward.

3.3 - **LMC office** to send out e-mail to Committee requesting self-nomination to AMC. **Update**: Nominations have been received however we don't yet have the full 5 GP Sub representatives needed. A request was made for any further volunteers to contact LMC office should they have capacity to take this on. Backfill funding is available for attendance.

3.4 - **LMC office** to raise data controller issues/3<sup>rd</sup> sector access to records with Information Governance team / Tracey McKinley. **Update:** A virtual meeting has been set up with the Information Governance team to discuss this further and an update to Committee will follow.

#### 4. PCIP Trackers review

The latest versions of the Primary Care Improvement Plan Trackers were circulated to Committee in advance of the meeting. A summary of each tracker was provided by the HSCP;

#### Edinburgh (David White)

During the 2020/21 financial year, WTE from PCIP activities increased from 115 to 170, with between 50-60 WTE still to go to reach full implementation. There has been recruitment in pharmacy, ANPs, physiotherapy and Mental Health, although the Mental Health posts have been replacement of staff rather than expansion of the workforce.

It was noted that 4 practices have received very little PCIP resource, mainly due to space constraints making it difficult to embed these staff, and work continues to try to resolve some of these issues.

Under half of the practices have access to CTACs, however this should increase to 55 practices (from a total of 70) by late September/early October.

Overall good progress considering the pandemic, and Committee highlighted the collaborative approach with the GP community. It was however noted that the current level of funding is inadequate and will not fully deliver the contract.

#### Midlothian (Jamie Megaw)

It was noted that a revised PCIP will be developed over the summer following more clarity around funding from Scottish Government.

Following some initial delays, CTAC has now been operational in 3 areas of Midlothian for a number of weeks. 25% of practices won't have CTAC in place by the deadline, however it is expected to be in place by April 2022.

Practice capacity remains an issue and this will be reviewed in the summer to look at how practices use their building as they re-open post-COVID. Work is also underway to consider the impact of house building across the area.

It was noted that current levels of funding are significantly short to deliver against the full cost of the PCIP and work continues to finalise these costs. It was also noted that it will not be possible to achieve the full contract aims by April 2022.

East Lothian (no HSCP representative in attendance)

East Lothian's PCIP tracker was received by Committee.

Most practices now have some level of pharmacotherapy support and this is a very welcome addition. All practices have some level of access to CTACs although it was noted that this works best when located within practices. All practices have access to the MSK advice line and access to Mental Health via the CWIC team.

A concern was raised with regards to the urgent care services provision stated in the tracker – CWIC is currently in 4 practices with an expected increase to 7, leaving 8 practices with no access to urgent care and no clarity on an alternative. Some practices have also raised concerns around the CWIC model. It was agreed that further discussion is needed with the HSCP.

**AP** – **LMC office** to discuss concerns around the East Lothian CWIC roll out with the HSCP team.

#### West Lothian (Elaine Duncan)

It was noted that all West Lothian funds have been allocated and the latest version of the PCIP tracker shows the final allocation for separate staff groups.

All CTACs nurses are in place for all practices, with the phlebotomy element currently in training and going to practices soon.

Link workers are accessible to all practices through the Mental Health Hubs.

It was highlighted that an increase to the current assumed staffing levels (23 rather than 14) will be needed for flu vaccinations should social distancing be required. These numbers also don't take into account any new age cohorts that may be included.

Committee highlighted the lack of clarity with regards to Urgent Care services, and the need for further guidance from Scottish Government was noted.

Further clarification of the financials within each Tracker was also sought.

**AP – All HSCPs** were asked to resubmit their full financial data, with sign-off from Finance.

Overall, all PCIP Trackers were otherwise accepted as a fair reflection of the current position.

## 5. COVID Vaccine Programme Update

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

The programme is currently working through Cohort 10 (age 40-49) and expect to complete by end of May. Cohort 11 (age 30-39) is expected to start on 24<sup>th</sup> May, however the decision not to administer the AstraZeneca vaccine to <40s has made the planning of 1<sup>st</sup> doses more tricky.

A publicity campaign will start on 24<sup>th</sup> May for Cohort 12 (age 18-29), asking people to self-register for an appointment. A letter offering an appointment will follow to those who don't register.

Letters have been issued to households of immuno-suppressed patients offering vaccines to all those within the household who haven't already received one.

Local agreements are in place for 2<sup>nd</sup> doses for housebound patients.

The aim is to have all 2<sup>nd</sup> doses completed by some point in September and then look at any plans for boosters. No real decisions have been made on this yet, but would likely be from 1<sup>st</sup> October onwards.

Discussions are currently underway for the mop-up arrangements for patients from Cohorts 1-9 who haven't received the vaccine. Limitations on the use of AZ make this more complicated and no decisions have been made as yet but will be communicated as soon as possible.

## 6. CAMHS update

Committee Chair recently met with the South Edinburgh CAMHS team to discuss eating disorder patients and recent requests for parked patients to be monitored by their GP. This should now be resolved, with practices only responsible for the initial referral and any further monitoring being done through the Sick Kids hospital.

The latest meeting between Committee Chair and Andrew Watson, Associate Director, Psychiatry was very productive and covered various elements of mental health. Looking to have a refresh of the dementia pathway, with a more generalist rather than psychiatry-based approach.

Committee were encouraged to hear that the Action 15 monies had been guaranteed for the coming year.

A Clinical Advisory Group, feeding into NHSL Board, is planned and GP representation on this very important group was sought. Anyone interested in getting involved in this group and making these pathways better, please contact LMC office or discuss further with lain Morrison.

**AP – ALL**. Anyone interested in getting involved in the Psychiatry Clinical Advisory Group, please contact LMC office or discuss further with Iain Morrison.

## 7. GP Support and Advice Group update

The Lothian GP Support and Advice Group (GPSAG) have recently recruited 4 mentors to the team, a welcome addition to this invaluable service.

Further information on this and other GP support services can be found on the LMC website (lothianlmc.co.uk) under the "What We Do" section.

Entry points into GPSAG are through Dr Nigel Williams (Medical Director for Primary Care Services), any of the HSCP Clinical Directors or through the Lothian LMC office.

## 8. Medical Directors Business

8.1– **AMC representatives updates.** Self-nominations for AMC representatives have been received however we don't yet have the full 5 GP Sub representatives needed. Any further volunteers should contact LMC office should they have capacity to take this on. Backfill funding is available for attendance.

**AP: ALL**. Any further volunteers for Area Medical Committee should contact LMC office.

## 9. **AOCB**

9.1 – **David Small retiral.** Chair expressed his thanks to David Small for his phenomenal service to general practice and NHS Lothian as a whole for over 30 years. He has been immensely helpful to the office and will be sorely missed by all, and Committee wished him all the very best in his retirement.

David responded by thanking Committee for their collaborative approach and commitment to always looking for a way to make things better – he has enjoyed working with us.

The meeting closed.

Date of next meeting – Monday 21<sup>st</sup> June 2021, 7.30pm