

GP SUB-COMMITTEE OF NHS Lothian Area Medical Committee

Monday 21st November 2022

7.30pm

At Novotel Edinburgh Park

Chair –Dr Iain Morrison

MINUTES

Attendance: Dr Iain Morrison, Dr Jenny English, Dr Neil MacRitchie, Dr Euan Alexander, Dr Gordon Black, Dr Stuart Blake, Dr Peter Cairns, Dr Fiona Ford, Dr Andrew Forder, Dr Rebecca Green, Dr Kerri Greene, Dr John Hardman, Dr Clementine Johns, Dr Hazel Knox, Dr Annie Lomas, Dr John Magill, Dr Jane Marshall, Dr Colin McArthur, Dr Ramon McDermott, Dr Laura Montgomery, Dr Rory O’Conaire, Dr Kath Robertson, Dr Catherine Smith, Dr Shelagh Stewart, Dr Elizabeth Strachan, Dr Jane Sweeney, Dr Ros Wight, Ms Jenny Long, Ms Alisson Stewart, Mrs Nicola Smith

Apologies – Dr Elena Del Vescovo, Dr Maria Marecka, Dr Catriona Morton, Dr Nick Payne, Dr Laura Tweedie, Dr Caroline Whitworth, Ms Tracey Gillies, Ms Alison McNeillage, Dr Hayley Harris

Welcome – None

Chair opened the meeting and warmly welcomed committee members.

1. Minutes of the last meeting 24th October 2022

The minutes from the previous meeting were approved.

2. Matters Arising / Actions from last meeting;

2.1 - **PC** to provide an update on the ongoing printers and laptops issues following discussions at the next PCITOB meeting. **Update:** A new patch has been deployed which, following sign off, it is hoped will rectify the majority of issues. For any issues that remain, an engineer will visit individual practices to troubleshoot. **CLOSED**

2.2 – **TG** to raise Vaccine Transformation Programme concerns with Dona Milne. **Update:** The meeting between Jenny Long, Dona Milne and Pat Wynne has taken place. IM has also been invited onto the Vaccine Oversight Group going forward, and plans remain to hold a meeting with Dona Milne to discuss the various different issues in respect of delivery of the vaccine service. **CLOSED**

2.3 - (*c/f from October meeting*) **RG** to confirm once the amended Midlothian PCIP tracker (May) has been approved by local reps. **Update:** A further review of v5 of the tracker has taken place, however in light of the fact that v5.5 of the tracker is now due for submission, a pragmatic decision was made to agree v5.5 as the position going forward. **CLOSED**

2.4 – Following the SAS presentation at the meeting of 24th October, a question was raised regarding the forward booking of ambulances for attendance at clinics, etc. Gareth Evans has since confirmed that the booking patients into next-day clinics would be classed as routine work and currently there is no opportunity to book routine transport during the OOH period. However, it was noted that as models of care change, SAS will look to support patients accessing these services. **CLOSED**

3. **Patient Registrations/Virtual Practice**

Committee were informed that while conversations around a potential virtual practice continue, the current position with Gracemount Medical Practice may provide a different approach. A tender notice has been issued for Gracemount, with a number of notes of interest already being made. Without yet knowing the outcome of the tendering process, it is hoped that this could provide another potential option to provide a service for those patients currently unable to register in Edinburgh.

It was noted that the number of Lothian practices with closed lists is increasing and this continues to be carefully monitored.

Further updates will be provided to Committee.

4. **Bariatric Follow-up**

A recent review of bariatric activity within the Midlothian HSCP area demonstrated that 25% of bariatric surgeries were performed in the NHS with the other 75% being performed privately, either within the UK or overseas. From the surgeries performed, one third receive post-surgery monitoring while the remaining patients don't. This highlights a major gap in the service, and it's expected that this picture is replicated across Lothian.

It was noted that the new Clinical Director of General Surgery will be in post within the next few weeks and we hope to work with the new incumbent to agree a suitable level of bariatric service moving forward.

A further Committee update will follow the discussions with the Bariatric service.

5. **Radiology**

Committee were informed of a small number of recent requests from Radiology to practices, asking practices to review patients who had been on the wait list for ultrasound scans for a considerable time, and if the practice decided the scan was still required they should re-refer the patient.

After some discussion, we believe that these are one-off requests and are not the standard approach of Radiology. It was noted that any review work such as this should be owned by Radiology, and if any other examples are received please make the office aware.

Committee were also reminded of the need to inform patients being referred for x-ray to wait at least 24 hours before contacting the department for an appointment, to allow for sufficient administration time. This is noted in the patient form received by the practice but it may be helpful to highlight this.

It was however noted that wait times can be significantly different within areas – varying from 1-2 days to up to 10 days - which can make managing patient expectations difficult.

6. **GPAS**

The monthly GPAS report for October was circulated in advance of the meeting.

Overall across Lothian there was a slight improvement since September, although each locality area continued to report the same status as in September.

50% of the returns during October reported as either Amber, Red or Black, with Black representing unsafe to continue beyond 14 days, and a risk of hand back of contract.

Return rates have increased slightly, although it was recognised that the practices who are under the greatest pressure are the most likely to struggle to complete their GPAS return. Therefore while the report provides strong data to review and compare each month, it's understood that this is not a full picture of the current position.

Committee remain very grateful to all practices and practice managers for taking the time to submit their returns.

7. **Doctors Support and Advisory Group**

In an effort to increase clarity around the support available specifically to GPs, it was proposed that the Doctor's Support and Advisory Group (DSAG) change its name to the GP Support and Advisory Group (GPSAG).

Committee ratified the proposal.

The great work of the group was highlighted and practices were asked to raise awareness of the group, particularly if they know of a colleague who is struggling and in need of support.

Details of how to make contact with the GP Support & Advice Group along with details of other sources of advice and support can be found on the LMC website (lothianlmc.co.uk).

8. **Medical Directors Business**

8.1 – **Representative movements;**

i) **NE Edinburgh representative**

Committee congratulated Dr Stuart Blake as the newly elected representative for NE Edinburgh. Committee also thanked Dr Laura Tweedie for her contribution during the last 4 years in the role.

8.2 – **PCITOB representative**

Dr Laura Tweedie will take on the role of GP representative on PCITOB committee.

9. **AOCB**

9.1- **Cross-border transfer of patient notes.** The continuing issues and delays in receiving notes for patients transferring into the Scottish system was highlighted. It was acknowledged that these issues are a known problem at the highest level, however while a solution has been identified, current resource constraints are delaying progress.

9.2 - **Workload in relation to SAR requests.** The considerable volume of SAR requests, particularly from solicitors, was raised as being an extremely time-consuming task in most practices. The option for practices to charge for some of this work was also raised. While acknowledging the volume of these requests and the impact on practice workload, it was accepted that the status quo is unlikely to change.

9.3 - **Pay uplift.** The DDRB have announced that a 4.5% pay rise will be awarded to GPs, in addition to increasing the GMS payment to allow an uplift to administrative (non-doctor) staff of 5% and an additional 4.5% for expenses. The increase, including correction for Scotland's population growth, means an uplift to GMS income of 5.6% which will be backdated to April 2022. It should appear in the November statement.

AP – Office to circulate details of the pay announcement to Lothian practices.

9.4 – Committee expressed their thanks to Dr Jenny English for her valuable contribution to the office over the last 4 years in her last meeting as Committee Medical Director. We are delighted that Jenny is staying on in her GP Sub and GPSAG representative positions, in addition to remaining on the wider GP Sub Committee.

Meeting closed.

Date of next meeting - **Monday 19th December via MS Teams**

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

Monday 23rd January (3rd Monday)

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)