

GP SUB-COMMITTEE OF NHS Lothian Area Medical Committee

Monday 25th October 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 Robin Balfour, Dr Drummond Begg, Dr Carl Bickler, Dr Gordon Black, Dr Stuart Blake, Dr Peter Cairns, Dr Elaine Duncan, Dr Andrew Forder, Dr Kerri Greene, Dr John Hardman, Dr Annie Lomas, Dr Ramon McDermott, Dr Laura Montgomery, Dr Catriona Morton, Dr Rory O’Conaire, Dr Nick Payne, Dr Hamish Reid, Dr Susannah Scarlett, Dr Amy Small, Dr Catherine Smith, Dr Shelagh Stewart, Dr Elizabeth Strachan, Dr Jane Sweeney, Dr Jon Turvill, Dr Laura Tweedie, Dr Ros Wight, Mr Ryan Addison, Dr Hayley Harris, Ms Jenny Long, Ms Alison McNeillage

Guests - Ms Jane Hopton, *Sustainability Lead, NHS Lothian*

Dr Erika Aspinall, *GP & RCGP SE Scotland Faculty Climate & Sustainability Lead (observing)*

Dr Miriam Duncumb, *GPST3, Tyne Medical Practice (observing)*

Dr Kiran Jayaprakash, *GPST1, Grange Medical Group (observing)*

Dr Suzy Scarlett, *LMC rep for NW Edinburgh (temporary cover for Dr Clementine Johns)*

Apologies – Dr Euan Alexander, Ms Tracey Gillies, Dr Katherine Robertson

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

1. Sustainability Presentation

Jane Hopton, Sustainability Lead for NHS Lothian, gave an update to the meeting on NHS Lothian’s Sustainable Development Framework. The presentation slides were shared with meeting attendees in advance.

Jane also highlighted NHS Lothian’s Sustainable Development Framework which is available on the internet and helps give a sense of the scope and ambition of the project.

<https://org.nhslothian.scot/Sustainability/Pages/default.aspx>.

The Sustainability team are also keen to engage with Primary Care to review and potentially update the actions included in the presentation (slide 16).

Committee views on the sustainability challenges were sought and the need for environmental sustainability was unanimously agreed. Some of the challenges faced in General Practice were highlighted;

- While practices are very open to the energy saving activities they can deliver, these are a very small proportion of the overall costs, with the lion’s share being part of the overall bill

of NHS Lothian. Jane informed Committee that the project has access to some funding that will allow them to roll out energy efficiency projects in smaller community premises owned by NHS Lothian, although they haven't yet found a source of funding for non-NHS Lothian owned premises.

- As independent contractors, General Practices have difficulty accessing some of the grants as this needs to be done through HSCPs. Could we consider lobbying Scottish Government to consider a direct award.
- The work involved in educating patients to review their inhaler use and consider the environmental impact is considerable, with practices struggling for this additional capacity over and above the standard recall procedures already in place. It was acknowledged that this wouldn't be a simple switch.
- Difficulties in obtaining electric car charging points and recycling facilities within practices, with no support from HSCPs or NHS Lothian and GPs being asked to cover these costs.

Expressions of interest for eBikes are also being requested in order to get a sense of scale and consider what funding options might be available. We need to get to the position where these are part of our fleet. The requirement for LUCS vehicle charging was also highlighted.

Committee thanked Jane for presenting on this very important topic, and offered our assistance going forward.

2. Minutes of last meeting 27th September 2021, for approval

Proposed amendment to Agenda item 4, COVID Triage Community Pathway, paragraph 2;

"If further face to face assessment is then needed, patients <16 should be directed to RHCYP, and adults referred to the COVID Assessment Centre (CAC) at WGH"

The proposed amendment was accepted, and the minutes from the previous meeting were approved.

3. Matters Arising/Actions from last meeting

3.1 – **C/F. TG** to contact ADTC to determine the process for SCA resource requests **Update (16/8)**: Discussed with PCCO who will take this forward with Jenny Long and Stephen McBurney. It was highlighted that the role of ADTC is more around the governance rather than resourcing aspect. **ONGOING**

Update: This is ongoing and relates specifically to the upstream approval process of any medication that requires monitoring and the need for appropriate resource identification at the same point of approval. There is agreement in principle that this needs to be done and recognition that this will be an ongoing problem and therefore needs to be resolved.

4. COVID Programme Update

COVID Triage community pathway:

The COVID Triage pathway moves back into practices from 1st November, and all practices have been informed. The Winter Pressures LES, brought in to support Lothian practices over winter,

has been circulated to all practices with a very high number of practices signed up at the date of the meeting. It was highlighted that the COVID Triage pathway and the Winter Pressures LES are 2 separate entities and are not linked.

A small change to previous COVID pathway discussions was highlighted following some ambiguity around the process for 12-16 year olds. Following some discussion with NHSL Board, it was felt that it would be cleaner if this was all done in practice in the same way as for the <12 population. The expected numbers for the 12-16 age group are very low, with even fewer requiring onward referral to RHCYP.

Poor levels of understanding of COVID symptoms and testing requirements, and the need for clear messaging and basic advice for people with a cough was highlighted, otherwise practices risk being overwhelmed. The National COVID enquiries helpline is still operational and general enquiries should still be directed there – only those requiring medical intervention/triage should be coming to practices.

COVID Booster / flu vaccines:

This continues to be a difficult situation for vaccination teams due to the loss of staff and ongoing recruitment challenges, all of which is impacting on appointments.

The Vaccination Programme team are continuing to work incredibly hard with the national system to try to resolve the ongoing issues with local vaccination site appointments which seem to be impacting Lothian more than any other Board, but the reasons for this are still unknown. On a more positive note, the issue with people being sent out of county for vaccinations seems to have been resolved.

The considerable damage done to both the COVID and Flu vaccination programmes as a result of the issues with the national appointments system/Service Now were noted. The hope was expressed that these issues will be addressed to ensure successful local vaccine delivery going forward.

5. Post-Menopausal Bleeding Pathway

Details of proposed changes to the Post-Menopausal Bleeding pathway were circulated to Committee in advance.

These were proposed following a small number of significant events where the onward communication to Gynaecology from radiology for patients with abnormal TV USS results had not occurred. This was thought due to radiology/sonographers not having access to SCI-gateway or timely access to email in order to complete safe and secure referrals.

It was proposed that after receiving notification of an abnormal report, GPs would now be asked to complete a SCI-gateway USOC referral to Gynaecology. This would be in addition to the onward email from Radiology but should ensure all the patients details are sent on.

While recognising the issues presented by the current system, it was felt that General Practice should not be the fail safe for services when there is the ability for a direct, competent pathway. Committee also queried whether the approach taken in other Board areas could be considered.

Committee did not support the proposal.

AP: LMC office to feedback Committee concerns around the proposed changes to the PMB pathway to Susanne Maxwell/RefHelp.

6. Lung Cancer Referral Pathway

The draft Lung Cancer Referral Pathway papers issued in advance, which detailed small changes to the CXR urgent suspicion of cancer (USOC) protocol/pathway, were noted.

Most of the changes involve secondary care, however it was highlighted that when referring for Urgent Suspicion of Cancer (USOC) x-ray, GPs should remember to inform the patient that a USOC referral is being made.

Following some discussion, Committee confirmed their support of these changes.

7. Payment for Pharmacist Clinical Supervision

The non-recurring funding from NES to be used in support of pharmacotherapy in general practice was previously discussed in February 2021 when it was agreed that it would be used to fund webinars.

However, this has now changed and the funding will be used to support up to 15 pharmacists attached to practices who are carrying out additional training through the GP clinical pharmacist framework.

Funding of £2000 (£1000 pa) may be available to practices if they have a pharmacist going through this training, however there is no expectation or obligation for practices to apply. Clarity is being sought around whether this funding is open to pharmacists in OOH.

AP: LMC Office to clarify if OOH pharmacists can apply for the NES funding to support GP clinical pharmacist framework training.

It was recognised that the work involved is significantly more than the funding levels, however this was seen as a contribution towards the overall costs.

8. GP Wellbeing Programme

As part of the £2m provided by Scottish Government (letter of 6th October 2021), £299,427 has been made available within Lothian to be used in support of primary care and social care workforce wellbeing. These funds have been allocated to HSCPs, and Lothian Medical Committee will be involved in the discussions around how they are distributed across practices.

While it's recognised that this is a relatively small amount of money, it's hoped that something can be delivered that will help practice teams during this time.

9. Medical Directors Business

9.1 - East of Scotland Paediatric Respiratory Virus Group

Committee were informed that this group meets every 3 weeks, looking at capacity and activity in the community and hospitals for the 3 boards in this area. Anyone interested in the outputs from

these meetings, or if you are aware of any changes in the area and want to make sure they're fed back into these meetings, please contact Neil MacRitchie.

10. **AOCB**

10.1 – **Scottish Social Security Changes**

Practices have been contacted with a request to sign up to these changes despite uncertainty about whether this will entail additional work for practices. Following some initial discussion with SGPC, it's unclear whether this is compulsory and therefore our advice to practices would be not to rush into signing up, and an update will follow further discussion at SGPC on Thursday 28th October.

10.2 – **Long COVID pilot.**

A Long COVID pilot in conjunction with NHS Lothian and Chest, Heart & Stroke Scotland is planned to launch soon. This will be a different service to that already on the CH&S website and will include access to tailored talks.

Volunteer practices, ideally from all 4 Lothian areas, are being sought to take part in the pilot. An email will be issued shortly with more details, and any further questions can be forwarded to Amy Small.

The meeting closed.

Date of next meeting – Monday 15th November, 7.30pm