

GP SUB-COMMITTEE OF NHS Lothian Area Medical Committee

Monday 30th October 2023

7.30pm

Virtual, via MS Teams

Chair – Dr Iain Morrison

MINUTES

Attendance: Dr Iain Morrison, Dr Neil MacRitchie, Dr Annie Lomas, Dr Euan Alexander, Dr Gordon Black, Dr Stuart Blake, Dr Peter Cairns, Dr Michelle Downer, Dr Polly Dunne, Dr Jenny English, Dr Andrew Forder, Dr Rebecca Green, Dr John Hardman, Dr Alexander Kelly, Dr Hazel Knox, Dr John Magill, Dr Jane Marshall, Dr Colin McArthur, Dr Ramon McDermott, Dr Douglas McGown, Dr Laura Montgomery, Dr Catriona Morton, Dr Rory O’Conaire, Dr Nick Payne, Dr Shelagh Stewart, Dr Deborah Strachan, Dr Elizabeth Strachan, Dr Jane Sweeney, Dr Laura Tweedie, Ms Jenny Long, Ms Alison McNeillage, Dr Hayley Harris, Ms Alisson Stewart, Mrs Nicola Smith

Apologies – Dr Jeremy Chowings, Ms Tracey Gillies, Dr Kath Robertson

Welcome – Dr Gareth Evans, *Clinical lead, Challenging Behaviour Practice*
Dr Michelle Downer, *newly elected NW Edinburgh representative*
Dr Polly Dunne, *newly elected GP Retainer representative*

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

1. Presentation – Challenging Behaviour Practice

Dr Gareth Evans gave a short presentation to committee on the Challenging Behaviour Practice within Lothian.

It is a statutory obligation for each Health Board to offer a violent behaviour practice, and the Lothian service is run from the Andrew Duncan Clinic at the Royal Edinburgh Hospital. The purpose of the service is to offset the risks to GP practices and the wider Primary Care team.

Patients who are considered to be either very challenging or very violent can be referred by their current practice to the CBP service via SCI Gateway and it was highlighted that practices need to refer patients to the service before taking them off the practice list as the referral must come from the practice. Following referral, a decision will be made as to whether the patient is appropriate for CBP. If accepted, the service generally retain the patient for around 6 months and would then ordinarily expect patients to be taken back into the referring practice.

The service are happy to be contacted by practices via their clinical mailbox (71171) with any questions.

Committee thanked Gareth and the CBP team for offering this service.

2. Minutes of the last meeting 25th September 2023

The minutes of the previous meeting were approved.

3. Matters Arising / Actions from last meeting;

3.1 – (c/f) **CM** to feedback Committee’s comments on the proposed changes to CAMHS Eating Disorders RefHelp guidance to the Eating Disorders team, and bring back a final draft proposal to GP Sub when available. **Update:** Work is ongoing and continuing to make progress. A meeting with Lorraine Small, Eating Disorder Senior Clinical Nurse Specialist, is being arranged. **CLOSED**

3.2 – (c/f) **Office/PC** to consider possible eHealth support/automation opportunities to assist with gathering of GPAS practice data. **Update:** Some discussions have taken place and work is ongoing. **CLOSED**

3.3 - **Office** to contact Rebecca Cheesbrough for clarification around the availability of antenatal protocols on RefHelp. **Update:** Becky has passed this onto the Obstetrics lead to take forward. **CLOSED**

3.4 - **Office** to contact Pat Wynne to discuss possible inter-departmental approach to dressings prescriptions and pathway for urgent-only referral to GPs. **Update:** A pilot is currently ongoing in Midlothian which is proving quite successful, and this may be scaled up across Lothian. A major review of district nursing across Lothian is planned. **CLOSED**

3.5 - **Office** to look to find out more detail behind the pigmented lesions referral rates for Lothian, as per LIG June meeting discussions. **Update:** We have emailed Dermatology and currently awaiting reply. **Ongoing**

4. **PCIP Demonstrator Sites**

The recent announcement from Scottish Government (27th September 2023) to provide additional funding of £10-£15 million across Scotland to implement a phased investment programme within 3 demonstrator sites was highlighted. The purpose of this activity is to demonstrate what a model of full 2018 GP contract implementation would look like in practice.

Lothian LMC have raised a number of concerns around this, including the significant risk to neighbouring practices and/or HSCP areas of the successful applicant, such as the potential loss of staff from other practices to a selected demonstrator practice. There are also major concerns that a widescale re-think of the 2018 GP contract is urgently required, and that this activity only delays the point of decision for another 12-18 months.

However, while these concerns have been raised, it is understandable that HSCPs see this as a positive opportunity, particularly with 80% of Scotland's population increase over the next 10 years forecast to be within Lothian, and it's expected that bids will be submitted from some of Lothian's HSCPs. If successful, GMS Oversight Group will look to mitigate any impact between neighbours and HSCPs will look to work cohesively and share best practice as much as possible.

It was noted that, due to the short timelines involved in preparing and submitting bids, it has been very difficult for practices to be involved in discussions.

A further update will come to committee when the demonstrator sites are confirmed.

5. **Enhanced Services Review update**

Committee received an update on the ongoing Enhanced Services (ES) Review discussions.

No ES have been selected for closure. While it was acknowledged that there is currently no additional funding available, a number of new ES are being worked up, in the hope that these will be able to be implemented quickly when any new funding is available.

Concerns were highlighted around the Anticipatory Care/Care Home LES, as this now represents an increase in work for the same level of payment.

It was also highlighted that Scottish Government have asked that we review the Palliative Care DES, and while we have little influence to make changes to this, Committee were asked to provide any comments to Annie Lomas.

AP – All to consider any potential changes to the Palliative Care DES, and feed back to Annie Lomas.

Committee will continue to engage in these discussions and hope to have new ES ready for the end of the year, for assessment by LMC early in 2024.

6. **Clinical Work Across the Interface**

Committee views were sought on this guidance document which has previously been discussed at LMC.

The overall aim of this document is to be informative, collegiate and collaborative, fully recognising the level of stress across the whole system while also clarifying and communicating important messages to help manage workload.

While the overall view from committee was supportive, with this being seen as a very helpful document for GPs and consultants, it was felt that it couldn't be approved as a GP Sub-committee document in its current format due to there being a number of issues within it that still needed to be fully resolved.

It is hoped that agreement as a Primary Care group can be reached in order to release this across the interface as a GP Sub-committee approved document. Lothian Interface Group have also confirmed that they would circulate to all Clinical Directors following GP Sub-committee consensus.

If GP Sub-committee consensus isn't reached, it will be circulated as an LMC document.

7. ADHD Medication Shortages

As a result of current ADHD medication shortages, CAMHS have issued a Patient Information leaflet to all children affected by the specific medication shortage. A version for adults is currently being finalised.

This is a very helpful document, although we have fed back to Psychiatry that there should be no suggestion in the letter that an alternative solution is available from your GP.

8. Edinburgh HSCP Mental Health Update

A brief update on the Edinburgh HSCP Mental Health group was provided.

It was noted that work previously been started on the development of community Wellbeing teams, in anticipation of expected Scottish Government funding, has now been stopped due to the current financial situation.

Community Wellbeing hubs are now in every Edinburgh locality and these are offering open access in order to meet some of the demand. Work is underway to gather referral data in order to get a reliable view of the overall impact of this service.

There continues to be reports of the difficulties with Emergency Detentions. Discussions are continuing, and the Psychiatric Emergency Plan (PEP) is close to being finalised. This will be a very helpful guide for all involved in Emergency Detentions.

9. Items for Information;

9.1 – Dermatology update

Dr Faye Porter, NHS Lothian Teledermatology and Referrals GP Advisor, recently gave a short presentation to the LMC Executive which highlighted a new digital dermatology pathway, currently planned for Lothian roll-out in February/March 2024, in addition to increasing the information held on RefHelp – both are welcomed.

The absence of GPSTs within Dermatology in Lothian was also discussed, and the benefit of having more dermatology education within the community was agreed. We will look to raise this where we can.

9.2 – Change in DEXA Reporting

Recent changes to DEXA reports were shared, highlighting that in addition to providing information on T-scores and BMD categorisation (normal, osteopenic or osteoporotic), there will be a standardised clinical interpretation with advice on management, based on SIGN 142 and local guidelines. This change updates reporting so that it is aligned to the reports received from Radiology.

Reports will no longer be sent out to practices, but completed reports are available via Docman / SCI Gateway. An update to management advice for osteoporosis and DEXA referral on RefHelp is also planned.

9.3 – Closure of Community Hospitals

The closure announcements for 2 Community Hospitals in West Lothian highlighted that such service change doesn't routinely come before the Area Medical Committee or GP Sub-committee in NHS Lothian,

while it does in some other areas in Scotland. It was highlighted that, under the 1978 NHS Scotland Act, while one of the functions of the statutory committees is to advise the Board of concerns, and this makes up a lot of our business, there is also a function to advise the board on strategic matters, and it was highlighted that the GP Sub-committee is keen and available to be consulted in this area.

9.4 – 2024 Meeting Dates

The meeting dates for 2024 GP Sub-committee meetings were shared in advance. The current format of holding one meeting per quarter in person will continue.

10. GPAS

The September GPAS report was shared in advance.

There has been minimal change in the reporting position across Lothian since the August report. It was highlighted that a more concise report has been produced/trialled, and any feedback on the new format is welcomed.

It was shared that colleagues from Scottish Government are currently looking at how they can use this information further. Committee again expressed their thanks to all the practices and PMs who take the time to report this data each week.

11. Lothian Interface Group minutes (August meeting)

The minutes from the August meeting were shared for information and taken as read.

12. Medical Directors Business

Committee warmly welcomed Dr Michelle Downer and Dr Polly Dunne, the newly elected representatives for North West Edinburgh and Lothian GP Retainers respectively.

13. AOCB

13.1 - Bumetanide shortage

The current shortage of both 1mg and 5mg Bumetanide tablets was highlighted (NHS Lothian Pharmacy and Medicines Service, 26th October 2023). Furosemide is an alternative, where appropriate. It is hoped that the Heart Failure Service will play a pivotal role in keeping these patients safe, although the likelihood of some additional work coming into General Practice was also acknowledged.

Full supply is expected to be available in March 2024.

Meeting closed.

Date of next meeting - **Monday 27th November 2023 at Novotel Edinburgh Park**

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

Monday **18th** December (3rd Monday)