

**GP SUB-COMMITTEE OF
NHS Lothian Area Medical Committee**

Monday 27th September 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 Stuart Blake, Dr Peter Cairns, Dr Andrew Forder, Dr Kerri Greene, Dr John Hardman, Dr Annie Lomas, Dr Ramon McDermott, Dr Laura Montgomery, 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 Jon Turvill, Dr Laura Tweedie, Dr Ros Wight, Mr Ryan Addison, Ms Sandra Allan, Ms Tracey Gillies, Dr Hayley Harris, Ms Jenny Long, Dr Nigel Williams

Guests - Ms Sally Egan, *Director of Maternity, Woman & Child Health & Child Health Commission NHS*
Mr Oliver Campbell, *Strategic Programme Manager, Maternal & Child Health*
Ms Margaret Callander, *Directorate of Strategic Planning and Maternal & Child Project Performance*
Ms Hannah Fairburn, *Strategic Programme Manager, SJH & Outpatients (observing)*
Dr Jane Barraclough, *GPST3, Conan Doyle Medical Centre (observing)*
Dr Mark Gotink, *GPST3, Penicuik Medical Practice (observing)*
Dr Simon McSheaffrey, *GPST3, West End Medical Practice (observing)*
Dr Shona Pass, *GPST3, Conan Doyle Medical Centre (observing)*

Apologies – Dr Drummond Begg, Dr Gordon Black, Dr Elaine Duncan, Dr Clementine Johns, Dr Catriona Morton

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

1. Presentation

Sally Egan gave an update to the meeting on Children and Young People Policy and Legislation. The presentation slides were shared with meeting attendees in advance, and will be circulated to practices with the approved minutes.

2. Minutes of last meeting 16th August 2021, for approval

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*

3.2 – **C/F, TG & IM** to discuss the proposed removal of the “advice only” dermatology service. *Update (16/8): Discussions ongoing, with regular meetings between GP Sub Chair and Dermatology. Recognised that the “advice only” service is essential going forward and there is a lot of collective will, however the Dermatology service is in a difficult place at the moment and this needs to stabilise before we look to restore.* **Update:** No change in the position. It’s recognised that this service reduces the number of new referrals from GPs. **ONGOING**

3.3 - **TG** to feed back Committee concerns/suggestions around the scheduling of appointments for COVID booster & flu vaccines. **Update:** TG has fed back re travel distances, etc. The significant issues currently being experienced as a result of the app-based scheduling were recognised. Practices will have a small amount of flu vaccine available to use for those in most need. **CLOSED**

3.4 - **LMC office** to feedback Committee comments on the Dermatology Recovery Programme paper to Peter Lock. **Update:** Done. **CLOSED**

3.5 - **TG** to feed back to Dermatology that GPs can’t be asked by patients to bump them up the waiting list unless there has been a change to their situation. **Update:** Done. **CLOSED**

3.6 - **JL** to look into securing the appropriate funding for LIG/other similar committees, either within PCCO or from other means. **Update:** This is being progressed. Feedback any concerns if the process doesn’t work as expected. **CLOSED**

3.7 - **TG** to feed back to Diabetes MSNs that pharmaceutical sponsorship of events is not within policy. **Update:** Done. **CLOSED**

3.8 - **All.** Any Lothian HSCP not sending a rep to the Long COVID meeting, please let Amy Small know. **Update:** Done. **CLOSED**

4. **COVID Programme Update**

COVID Triage community pathway: Issues continue with the challenges of staffing the COVID Triage Hub and the resulting impact on GP practices. Discussions are ongoing to agree an approach going forward that will provide a better service to patients. More details will follow once this has been agreed.

Clarity around the pathway for patients with active COVID was requested. The COVID Triage line should be the first step – if this isn’t operational, the patient will be directed to their GP for triage. 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. Appointments at the CAC required after GP phone triage should be accessed through the Flow Centre.

COVID Booster / flu vaccines: Both COVID booster and flu vaccinations are now underway. However, it was noted that the appointment scheduling approach and errors within the appointment letters have resulted in a very difficult week for GP practices who have received a high volume of vaccine-related calls from very frustrated patients.

5. **Phlebotomy capacity**

The increasing fragility of the primary care phlebotomy service was highlighted to Committee.

While high levels of phlebotomy requests from secondary care continue, more recent issues with practice HCA and treatment room staff sickness levels mean that GPs are now needed to do phlebotomy in addition to their other responsibilities.

6. Hospital Beds in the Community

The spreadsheet issued in advance of the meeting showing the current number of beds in Care Homes across Lothian was highlighted.

While it is easier to identify the number of beds that exist in acute settings at any point in time, the spreadsheet highlights the number of long term stay beds currently within nursing home settings across Lothian (5225), in addition to the 2101 hospital beds currently in Lothian patient's homes. GPs are responsible for looking after these 7326 beds and the pressures on health and care services both in and out of hours, and the need to monitor this going forward, was noted.

7. GP IT Reprovision update

A brief update on the GP IT Reprovision was provided to Committee.

Following an options appraisal process, the GP IT Decision Group has opted to assess the Vision Clinical System when it passes accreditation with National Services Scotland (expected in the next few weeks). The GP IT Decision Group contains both EMIS and Vision practice representation; the decision was put to a formal vote which was noted to be near-unanimous. It was also noted that there is ongoing concern about plans to bring EMIS Web to Scotland – EMIS were recently criticised for failing to provide a credible development timetable.

Dr Cairns thanked the GP IT Decision Group for the numerous presentations and workshops they have attended. Committee also thanked Dr Cairns and the Decision Group for their work on this.

8. Medical Directors Business

None.

9. AOCB

None

The meeting closed.

Date of next meeting – Monday 25th October, 7.30pm

**** This is a change from the original date****