

GP SUB-COMMITTEE OF NHS Lothian Area Medical Committee

Monday 10th Feb 2020

7.30pm

Novotel Edinburgh Park Hotel, 15 Lochside Avenue, Edinburgh EH12 9DJ

Chair - Dr Drummond Begg

MINUTES

1. **Attending** – Dr Drummond Begg, Dr Jenny English, Dr Euan Alexander, Dr Robin Balfour, Dr Gordon Black, Dr Stuart Blake, Dr Peter Cairns, Dr Jim Cowan, Dr Morgan Flynn, Dr Andrew Forder, Dr Kerri Greene, Dr Steven Haigh, Dr Katharine Hill, Dr Annie Lomas, Dr Ramon McDermott, Dr Catriona Morton, Dr Elizabeth Murray, Dr Nick Payne, Dr Kim Rollinson, Dr Catherine Smith, Dr Elizabeth Strachan, Dr Ros Wight, Ms Tracey Gillies, Mr David Small

Apologies – Dr Iain Morrison, Dr Carl Bickler, Dr Agata Dunsmore, Dr Hamish Reid, Dr Amy Small, Dr Jon Turvill, Dr Laura Tweedie, Ms Sandra Allan, Ms Alison McNeillage, Dr Sian Tucker, Dr Nigel Williams

Chair welcomed attendees and introduced the guests for the evening;

- Stephen Glancy, *Consultant Radiologist, Western General Hospital*
- Tracey McKinley, *Data Protection Officer*

2. **Radiology/Primary Care Interface**, *presented by Stephen Glancy*

Stephen Glancy presented a Radiology update to committee which was very well received.

The presentation summarised the work of the Primary Care Imaging (PCI) group, some of the pressures faced within Radiology and also shared some data on cancer pick up rates and other referral pathways.

The work of the Cancer of Unknown Primary (CUP) Team was highlighted as a useful resource, and it was noted that the CUP pathway is due to go onto RefHelp and SCI Gateway soon.

Ongoing review of the open-access to CT scanning for GPs has showed that GPs are using this pathway appropriately and there continues to be a high pick up rate of significant pathology. There was a request to continue with and encourage electronic referrals for all radiology requests.

Committee asked about the current wait time for CT scans – currently 2 weeks for all urgent cases, with all others/general cases targetting 4 weeks.

Committee gave very positive feedback on the work that has been done, and Chair thanked the group for their work.

3. **Data update**, *presented by Tracey McKinley*

Tracey McKinley highlighted the key documents issued in advance and summarised the approvals sought from committee;

1. Memorandum of Understanding between NHS Lothian and GP Contractors

If approved by GP Sub Committee, TM will write to all GP practices to ask whether they wish to participate in the Data Protection Officer (DPO) service. It was acknowledged that while sign up to the service is not mandatory, committee unanimously agreed that we should recommend that practices sign up to the DPO service. It was agreed that the letter to practices should be jointly signed by Tracey McKinley and Drummond Begg.

AP – TM to arrange for letter with joint signatories to be issued to practices for sign up to DPO service.

2. Joint Controller and Information Sharing Agreement

TM highlighted that GP contractors and NHS Lothian are now joint data controllers. A number of concerns around the amount of information held and some potential risks were discussed.

If approved by GP Sub Committee, it was proposed that we would also seek permission from our constituent practices to have a delegated role for any minor changes to the Agreement, with any significant changes having to come to full GP Sub Committee for approval.

Committee agreed that this approach seems practical and we would therefore propose this to practices.

Committee agreed that they were happy to move forward with the Memorandum of Understanding and Joint Controller and Information Sharing Agreement as discussed and granted their approval.

3. Dataloch

Dataloch is a data depository which will utilise GP data primarily to support research but will also be available to users (GPs). The link into the earlier

presentation to committee from Professor Bruce Guthrie (January 2020) was highlighted, and specifically the opportunity to harness data and work collaboratively with agencies, all of whom we already work and share data with.

Details of the Clinical Viewer dataset that would be captured were shared with committee, and it was noted that this system already exists and is currently being trialled by a number of practices. Committee agreed that they were happy with this approach.

Concerns were raised regarding patient identifiable data however TM confirmed that the intention is that this data would be unidentifiable and will reside within NHS Lothian with a governance team in place to vet requests for data.

It was also noted that NHS Lothian, rather than GP Contractors, would have overall responsibility and liability should any patient data be released in error.

It was acknowledged that while Dataloch is an opt-in choice for practices, the benefits to academic research in Primary Care are considerable if large numbers of practices agree to this.

Committee agreed that letters should be sent to practices regarding opt-in to the Dataloch service, highlighting key points, and that as joint data controllers, it was suggested that an NHS Lothian signature should be included on the letter.

AP – LMC office to draft letter for sending to practices for opt-in to Dataloch service.

4.Primary Care National Data Sharing Agreement

Committee approved the document circulated in advance.

Committee thanked Tracey McKinley and her team for the level of work done in this area.

4. Minutes of last meeting 13th January 2020, for approval

The minutes were approved.

5. Matters Arising/Actions from last meeting

5.1 The Quality Review papers have been circulated to practices, interested parties and also posted on the LMC website. In addition, the Quality Subgroup that will feed into the GMS Oversight Group has now been formed and will meet for the first time in March to establish the role and remit of the group. **DONE**

5.2 The “Review of GP Cluster Working in NHS Lothian” paper is on the GMS Oversight Group agenda for the next meeting on 25th February. **DONE**

5.3 TG is due to meet with Tobias Tipper, Head of Service for RHSC bloods process on 11th February. A further update will be given at the next GP Sub meeting. **ONGOING**

5.4 See agenda item 6.1. **DONE**

5.5 TG has made enquiries and is awaiting a response. **ONGOING**

5.6 Feedback has been given where required. **DONE** HSCPs are keen to get feedback on the non-anonymised parts of questionnaire.

AP – AMcN to arrange feedback to HSCPs on non-anonymised data from the Halfway Point Questionnaire.

5.7 The current wait time for Implanon insertions is 4 days, coil insertions is 4 weeks, and these can be booked online. Appointments can be made via the website which is very easy to navigate, or walk-ins are still available at both Chalmers and Howden clinics although patients may then be given a future appointment depending on their symptoms.

6. Chair’s Business

6.1 General practice review of onward referral of patients by consultants

Committee’s views were sought on consultant to consultant referral, rather than via the GP, and it was felt that this was appropriate in some cases providing it is in line with advice on RefHelp.

AP – ADB & TG to raise at Medical Director’s mtg that, where appropriate, consultant to consultant referral can take place providing this is done via RefHelp. For more complex/unclear cases, referral should be back to the GP.

6.2 Gender Dysphoria

Following recent discussion at Chairs Group it was stressed that the ownership and management of the different parts of the process need to be discussed, clarified and agreed.

Chair made committee aware of a forthcoming meeting with Dr Dan Clutterbuck, NHS Lothian Clinical Lead for Sexual & Reproductive Health to discuss this matter. A further update will be brought to committee following these discussions.

6.3 Orthopaedic Opt-in

Chair updated committee on the recent feedback given to Chris Myers, Clinical Service Manager Trauma and Orthopaedics, on a standard letter issued to patients informing them that they have been removed from the Orthopaedics waiting list and referring them back to their GP. Following the feedback, this letter has now been redrafted and highlights that there is no need for them to contact their GP.

It was noted that our feedback on behalf of committee requesting that patients could opt-out rather than opt-in wasn't taken on board as a result of evidence of the opt-in approach working well in other Health Board areas. Committee were keen to see data on the opt-in results over a period of time to monitor the success of this approach.

AP – LMC office to request analysis of Orthopaedics opt-in results at 3 and 6 month intervals, including info on demographics.

7. GMS Oversight Group update

The draft December minutes issued in advance were highlighted.

Committee queried the 18/19 underspend (55. Finance/PCIF, item 55.3) and asked for clarification as to whether this was carried forward. DS confirmed that the 18/19 underspend was carried forward into 19/20.

8. Medical Secretaries' Business

8.1 – Nominations and elections update

Committee were informed that following the recent election for the vacant NW Edinburgh seat, Dr Rory O'Conaire from West End Medical Practice was successfully appointed to the post.

9. Items for Information

None

10. AOCB

10.1. Coronavirus

Committee were made aware of warning posters that are being produced by NHS Lothian which aim to restrict patients at risk of Coronavirus from entering practices. Committee agreed that these should be issued to all practices.

10.2 Dr Steven Haigh retiral from GP Sub Committee

On behalf of GP Sub Committee, Chair expressed thanks to Dr Steven Haigh who is stepping down from the committee after many years representing West Lothian. Chair added that Dr Haigh has been an invaluable member of GP Sub Committee and his contributions will be missed.

The meeting closed.

Date of next meeting – Monday 9th March 2020