GP SUB-COMMITTEE OF NHS LOTHIAN AREA MEDICAL COMMITTEE

Monday 14th January 2019 **7.30pm**Novotel Edinburgh Park Hotel, 15 Lochside Avenue, Edinburgh EH12 9DJ

Chair - Dr D Begg

MINUTES

Welcome: Vicki Hepburn, GP Trainee, Grange Medical Group
Joan Donnelly, Service Director for Outpatients and Associated Services
Anne Donaldson, Associate Nurse Director
Julie Bladen, Service Manager for Flow Centre

1. Apologies

Dr Rachel Hardie, Dr Dave Cuthbert, Dr Morgan Flynn, Dr Annie Lomas, Theresa Cameron, Professor David Weller

2. Welcome

Chair welcomed Joan Donnelly, Anne Donaldson & Julie Bladen, who were joining us to provide an update on the Flow Centre.

Chair also welcomed Vicki Hepworth, GP Trainee at Grange Medical Group.

3. Presentation on Flow Centre

Joan Donnelly and Julie Bladen gave an informative and well-received presentation on the progress and ongoing work of the Flow Centre.

A copy of the presentation slides are available to view on the LLMC website under 'Advice and Guidance, 'Presentations', or via this link https://t.co/Unew3Am02N.

Following the presentation, the committee were asked for feedback and also for their suggestions of future development priorities.

Chair commented that GP Sub-Committee fully support the current work done by the Flow Centre, with comments from the committee expressing their largely positive experiences. A concern was raised regarding difficulties experienced in accessing the Flow Centre by telephone (long wait times), and it was acknowledged that a new telephony service scheduled for delivery in 2019 should improve the service.

Communication between the Flow Centre and GPs was discussed and it was noted that more could be done to sell this successful model to GPs in order to increase the level of usage.

GP Sub-Committee also requested that specialties not currently covered by the Flow Centre should be considered and included going forward.

After some discussion, it was agreed that the 3 top priorities for future development of the Flow Centre were;

- 1. Mental Health emergencies
- 2. Speed of access
- 3. Nurse referrals

Modern Outpatients

Chair welcomed Dr Nik Hirani, Associate Medical Director for Outpatient Services and invited him to give a brief overview of Modern Outpatients.

Dr Hirani summarised some interesting data on patient travel to outpatient appointments and added that we need to use initiative to change how we service these patients going forward.

Chair thanked NH for inviting GPs onto the working committee for Modern Outpatients, adding that the GP impact factor and whole system gains from improved working are key factors in the success of this model, which has the potential to deliver huge wins for all parties.

A concern was raised around the availability of GP funding to support this work. Joan Donnelly confirmed that funding has been approved for GP support of this work in 4 specialties (Dermatology, Adult ENT, Urology and Ophthalmology).

4. Minutes of last meeting held on 10th December 2018.

Dr Liz Murray was present at the meeting. Dr Stuart Blake's name was corrected. An amendment was made to Point 11. Sexual health Service Group – HFB clarified that although Chalmers results will be CHI based, patients can still opt out of this system to keep their results completely confidential.

Amendments were also made to Point 13. Recent Winter SLAs with the following additional points added 'Committee did not agree with the short-term weekend opening of practices as suggested in the SLA, there were concerns about creating 2 OOH services which would be confusing to patients.'

5. Matters Arising/Actions from last meeting

Chair gave a brief update on the following points;

- **5.1 OOH service**. DS & ADB are meeting in March to review Winter SLAs for both In Hours and OOH and will feedback to GP Sub Committee following that meeting. Chair highlighted our commitment to ensuring we have a functioning OOH service while considering the impact on In Hours GPs.
- **5.2 Anti-Psychotic prescribing**. Chair referred to the paper issued in advance (Proposed System for Monitoring People who take Anti-Psychotic Medication) and asked for comment. The paper was welcomed and read with interest.

A question was raised around whether it was comprehensive enough to facilitate rigorous monitoring. Chair responded by stating that the important factor is that GPs would now have clarity that someone has ownership of the monitoring of anti-psychotic agents.

It was suggested that we include some details around initial assessment, and also clarify/expand what we mean by "patient needs".

Chair agreed to modify the paper and share with HSCP colleagues in order to update them on the views of GPs.

ACTION: LMC OFFICE

5.3 ANP Clinical Governance. Chair is meeting with Trish McIntosh and others on 15/1/2019 to discuss and will bring back to a future meeting.

ACTION: LMC OFFICE

5.4 Diabetes MCN – Chair is meeting with colleagues on 22/1/2019 and will bring back to a future meeting.

ACTION: LMC OFFICE

6. Chairs Business

No update.

7. GMS Oversight Group

DS provided an update on a number of areas;

- **7.1 Pharmacotherapy.** Progress continues on recruitment, with adverts now out. It is recognised that there is still some way to go in order to reach levels of staffing as set out in the MoU.
- **7.2 CTACS**. Preliminary work on CTACS due to begin with a focus on the logistics of providing IT support and creating effective pathways for use of the service.
- **7.3 Workforce survey.** There is a need for more detailed information about the additional workforce requirements across the various professional groups,

therefore a workflow survey is being planned which will identify how many ANPs, pharmacists, paramedics, etc., at which grades are needed. Work is also being done to create more detailed training to complement other education courses.

7.4 GP Premises. The first tranche of loan grants have now been received, and negotiations are underway for 5 leases. A new set of premises directions are expected from the Scottish Government soon.

It was noted that Peter Cairns has been appointed as eHealth Clinical Lead. Chair commented that this was an excellent appointment, which was also very positively received by attendees.

SH queried whether a solution had been found for the phlebotomy LES funding (under point 6. Finance of paper issued in advance). DS confirmed that each HSCP has been asked to fund this work for 2019/20.

Chair commented that following very positive feedback from the LLMC Roadshow in November, we are planning something similar to precede the AGM which is to be held on 11th March. Chair sought permission of GP Sub to move the timing of the March meeting to accommodate this proposal. Permission was granted.

Chair asked DS to present a brief GMS Contract update at this event. Stuart Mercer and Bruce Guthrie will also be invited to speak.

8. School Nursing Services

Chair highlighted the papers issued in advance for information.

HFB asked whether these changes will also apply to fee-paying schools. The LMC Office will contact Sally Egan for clarification of this point.

ACTION: LMC OFFICE

9. Medical Secretaries' Business

9.1 PCITOB Update - Minutes from the 13th November 2018 meeting were received.

Maintenance window. A question was raised as to whether practices need to be informed about the proposal to run desktop updates on a Monday evening. IM stated that one of the benefits of centralisation was that upgrading of programmes should now be more straightforward. Practices will need to leave their desktops switched on every Monday evening in order to receive auto upgrades. E-Health should communicate this to practices.

Docman errors. Concern was raised around the lack of management of clinical systems and the need to potentially re-procure as we are paying them to fix errors when something goes wrong. IM reported that this has been raised with NSS.

Chair asked that we thank the team involved in central server migration for their hard work and significant acceleration of this activity.

9.2 Pensions Proposals. IM summarised the pension reform proposal circulated to practices on 27th December. The proposed employers' increases to 20.9% from the current 14.9% will result in a 30% uplift in pension contribution expenses within practices. LLMC has submitted responses to both Westminster and SPPA, highlighting our significant concerns. Chair added that the impact this proposed change would have on the current partnership model cannot be overstated.

10. AOCB

None

Date of Next Meeting – Monday, 11th February 2019

Future meeting dates

Monday, 11 March

Monday, 8 April

Monday, 13 May

Monday, 10 June

Monday, 12 August

Monday, 9 September

Monday, 14 October

Monday, 11 November

Monday, 9 December