LOTHIAN LMC AGM

CHAIR'S REPORT 2018

I would like to start by paying tribute to my predecessor, Catriona Morton. Her incredible commitment to the role and to general practice is well recognised. She led us at a time of significant challenge with skill and dedication.

Thank you Catriona for your work as Chair and for the ongoing work that you do on behalf of GPs.

New Scottish GMS Contract

Since being elected Chair in October 2017, the main focus has been on the new contract.

The Special conference of SGPC in December was constructive and resulted in an overwhelming endorsement of the contract. The Roadshow in Lothian was fully booked, something not seen for over a decade and despite using our largest regular venue with capacity for over 200 people. The ensuing poll and SGPC vote in January saw the contract being accepted by the vast majority of the profession.

When change occurs it can be unsettling, this contract has been no different with a lot of discussion around 'winners and losers'. Especially around the allocation formula. It has been and will be important to acknowledge this.

As Chair, I have tried to focus on the potential benefits that significant investment in primary and general practice might bring to General Practices and the people we serve.

A key theme of the contract is around collaborative working or 'era 3' working.

In line with this approach, we have agreed with HSCPs and Health Board a tripartite committee to ensure efficient collaborative working. As Chair of LMC, I am keen to see the GP sub-committee foster improved relationships with Health Board whilst maintaining our good relationships with the 4 integrated Joint Boards in the region.

I recognise the deep mistrust felt by those who have battled with Lothian Health Board through a decade of decline in General Practice. For some it must be difficult to forgive LHB for the seeming indifference they have shown towards GPs.

I have nevertheless worked on building relationships, promoting the value of General Practice and presenting General Practice / Primary care as a solution to the healthcare needs of Lothian.

At the Primary care summit in February, I presented a 2 step approach to developing General Practice. Step 1 – repair the damage and stabilise practices. First and foremost so that GPs can have safe and sustainable working practices. This will allow us to move to Step 2 where GPs and primary care expand their services as part of an attempt to balance the current situation.

LMC office

I spent some time restructuring the office, mainly by necessity not design.

We let our LMC coordinator go in January and are interviewing for her part -time replacement in March. We have separated the functions of GP sub-committee and LMC more clearly with admin support and Chair of GP sub being paid for by the Health Board.

The LMC will be separate but will continue to pay for the GP sub / LMC meetings held monthly.

I am incredibly grateful to Pete and Iain for the fantastic support and patience they have shown through what has been a challenging transition. I also thank Catriona for her support and guidance.

Focus on the Big 4

I have identified the new contract, Modern out-patients, IT and premises as the big 4 issues the LMC needs to input into over the next year. It is important to be reactive to constituents difficulties and I would like to pay credit to the Medical Director Tracey Gillies in the way that she helps facilitate small improvements to help smooth working arrangements.

I would like to see the LMC continue to serve constituents needs and to be reactive to their difficulties, I am very grateful for the wisdom that Pete brings to our meetings.

I would also like to see the LMC be pro-active in setting the agenda for the big 4 going forward though. The new contract needs to be implemented without delay with real positive change being seen by constituents soon , modern out-patients needs to be designed to service patients and GPs needs, IT is crucial – as is often said a GP without effective IT is like a surgeon without a scalpel. Finally the next big 'hospital' LHB should build is care 'Primary care – we will seek to push for increasing capacity in community based resources by making the next decades building project a primary care focused one (not another hospital)

Farewell to Richard William

I would like to thank Richard for the phenomenal work over many decades on behalf of GPs in Lothian. It is only when he has been handing over his roles that you realise how many he had. From assessor /trustee of small grants application to Chair of Drs support group it is difficult to see where Richard hasn't been!!

As he steps down from Lothian Health Board, the unbalanced nature of the Board appears stark. Lothian Health Board is not alone in moving further away from the aspirations of 'Our 20/20 vision' over the past decade. We have a system which has significant focus on services run by hospital based clinicians of limited scope where we should have more services run by community based clinicians of unlimited scope.

General district nursing, general practice nursing, general physiotherapy and general medical practice to name but a few have been undervalued - I hope that the new GMS contract will be the catalyst for change.

I look forward to the challenges that lie ahead and hope to represent the views of constituents effectively.

Drummond Begg