

MINUTES
Videoconference Meeting of the GP Subcommittee
on Monday, 18th January 2021 at 7.30pm

Sederunt

Drs Michael Anderson, Rachael Bowman, Ronnie Burns, Maureen Byrne, Vicky Clark, Gayle Dunnet, Mark Fawcett, Gordon Forrest, Helen Fox, Sheena Fraser, Norrie Gaw, John Ip, Waseem Khan, John Kyle, Susan Langridge, Gillian Leslie, Alan McDevitt, Chris McHugh, Hilary McNaughtan, Christopher Mansbridge, Graeme Marshall, Steven Miller, Patricia Moultrie, Austin Nichol, Alex Potter, Dawn Rees, Michael Rennick, Paula Rogers, Samir Shukla, Jasmeet Singh, Alastair Taylor, David Taylor, Graham Thompson, Raymund White.

Chair

Dr Alan McDevitt CBE, Chair of the Committee

Attending

- Marco Florence, Secretary to the Committee
- Lorna Kelly, Interim Director of Primary Care, NHS Greater Glasgow and Clyde
- Susanne Millar, Primary Care Lead for Chief Officers in Greater Glasgow and Clyde
- Dr Kerri Neylon, Deputy Medical Director for Primary Care, NHS Greater Glasgow and Clyde

Apologies

Drs Katie Adair, Parisa Ghanbari, Ruth Gibson, Mark Storey
Dr Ron Alexander, Hospital Subcommittee Representative

Minutes GP Subcommittee

20/46

1. Draft Minutes of the GP Subcommittee 21st December 2020

The draft minutes were approved by the committee.

Matters Arising

20/47

There were no matters arising.

Covid-19

20/48

1. Community Pathway Update

Since the email went out from the LMC indicating that the escalation plan may have to be activated, the situation has stabilised. Situation has moved away from needing to activate the emergency contribution but need to be sure there is an objective measure in place for when it is needed. Information on attendance figures at the CACs and where referrals have come from was shared with the Committee. It was underlined that if needed, participation would be voluntary.

A small number of practices have registered for Rotamaster. Videos are being worked on regarding the CACs and work is underway to standardise the standard operating procedures for all of the CACs.

The important role of the hub within the community pathway was outlined.

Dr Neylon stated that practices in GGC have worked well together and that the out of hours service is important to the pathway.

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The threat of needing the emergency contribution is receding but work is needed should it be required.

2. Covid-19 Vaccinations-Wave 1

The vaccination rate for care home residents as of last week was 96% in GGC. Very successful. Staff programme-scheduling change on Hogmanay opened up a lot more slots for GPs and staff but need to ensure second dose doesn't go beyond 12 weeks. The BMA is active on the changes that were made. Second doses will start in March.

Over 80s-a number of committee members highlighted supply issues with vaccines failing to arrive when expected. Staff are therefore worried about booking patients and they are also struggling with calls from patients asking when they will get vaccinated. Concern was also raised about practices in different areas getting vaccines first. It was asked if Movianto has the capability of delivering what is needed. Supply issues should be solved soon.

Practices that had received vaccines were positive about their experiences of delivering the vaccine.

It was noted that some practices had been asked to help with housebound patients.

A policy on spare doses has been agreed and sent round practices.

Practices' packs do contain doses for the housebound but only works if they have spares from those the practice is doing.

NHS Escalation

20/49

1. GP Subcommittee Leadership Engagements

The Chair and Medical Directors are attending a number of meetings/groups including: the Hub and Assessment Group, the Population Covid Group, the Data Sub; Primary Care Coordination Group; Primary/Secondary Care Interface; GMS Operational; PCIP; Primary Care Programme Board; Covid Vaccination Group; Covid Vaccination -Staff Group.

2. NHS Escalation

Standing item. No discussion on this topic at this meeting.

PCIP Implementation

20/50

1. Pharmacotherapy Staff

It has been raised with the health board that pharmacotherapy staff were unilaterally told to work from home. Neither the LMC nor practices were consulted. Some of their tasks cannot be done from home. Whilst the Scottish Government has a message about working from home, it is about where work can be done from home. It was felt that the way this decision was reached failed to take account of pharmacotherapy staff being attached to practices. The six chief officers have written messages outlining that the work from home message doesn't apply to critical frontline workers.

Notes/Reports from Meetings

20/51

1. Childhood Immunisation Group, 11th January 2021

This report was noted by the committee.

2. Oral Report from Area Medical Committee, 15th January 2021

An update from the hospital sub committee outlined the pressures being experienced in secondary care. It was outlined that there are more Covid patients in hospital than during the first

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peak. This is likely to be the case for another two or three weeks. Junior doctors are being redeployed. Flow hub is going reasonably well. It had been stated on behalf of the GP Subcommittee that no significant amount of inappropriate referrals to GPs are being made from it.

The AMC outlined the huge effort that had been made by the health board's management to deliver the vaccine and deal with Covid. These comments were echoed by the Chair of the GP Subcommittee, with the Chair praising the efforts of officials.

It had been intimated that a request had come in that advisory committees don't meet until the end of February but given their importance it was hoped that the AMC will meet in February.

Shared Care Agreements

20/52

1. Adult Melatonin Shared Care Agreement

Very few changes since the agreement from August 2018.

EMIS needs updated to ensure this is at the top.

It was felt that the proposal suggests that only secondary care can start this prescription. However, GPs can prescribe melatonin. It was therefore felt that the proposal was inappropriate.

Action Point-Dr John Ip to feedback to Prescribing Interface Sub Committee of ADTC

Any Other Business

20/53

Feedback was needed on whether to extend the AMC session. There are no GP Subcommittee elections due, only for Hospital Subcommittee representation.

This proposal was agreed by the GP Subcommittee.

The next meeting of the **GP Subcommittee's Executive** will be on Monday, 1st February.

The next meeting of the **GP Subcommittee** will be on Monday, 15th February.