

[Private & Confidential]

GREATER GLASGOW & CLYDE AREA MEDICAL COMMITTEE
General Practitioner Subcommittee

MINUTES of the MEETING of
the COMMITTEE held on
16th October 2017 in the
Committee's offices at 40 New
City Road, Glasgow G4 9JT

- SEDERUNT:** Drs Ronnie Burns, Elizabeth Denholm, Gordon Forrest, Michael Haughney, John Ip, Punam Krishan, Susan Langridge, James Mackenzie, William Macphee, Kathryn McLachlan, Chris McHugh, Christopher Mansbridge, Graeme Marshall, Steven Miller, Patricia Moultrie, Alex Potter, Paul Ryan, Mohammed Sharif, Mark Storey, Alastair Taylor, Chris Tervit, Michael Rennick, Blair Walker and Raymund White.
- CHAIR:** Dr Alastair Taylor, Chair of the Committee, chaired the meeting.
- APOLOGIES:** Apologies for absence were received from Drs Colin Black, Maureen Byrne, Vicky Clark, John Dempster, Mark Fawcett, Norrie Gaw, Parisa Ghanbari, Alan McDevitt, Hilary McNaughtan, Euan Mabon, Paul Miller, Kerri Neylon, Jean Powell, David Taylor, and Alasdair Wilson.
- ATTENDING:** Mr David Williams Chief Officer (CO) Glasgow City HSCP and Lead CO for Primary Care.

Mrs Mary Fingland, Secretary of the Committee.
- REVISED AGENDA:** The GP Subcommittee received the Revised Agenda.
- MINUTES: 17/029** The GP Subcommittee received the Minutes of the meeting held on 18th September 2017.

The Minutes of the 18th September 2017 were approved and signed by the Chair.
- MATTERS ARISING:** (a) **Minutes of the Executive GP Subcommittee of 2nd October 17/030**
2017 Items and Reports:-
1. Report of the ADTC Medicines Utilisation Subcommittee meeting held on Wednesday 27th September 2017

Noted.

Members heard that a response had been submitted on the proposed Pain Guidelines.

2. Report of the Paediatrics Interface meeting held on Thursday 31st August 2017

Noted.

3. Report of the Vitality and Live Active meeting held on Wednesday 20th September 2017

Received.

Data Sharing

The GP Subcommittee spoke of concerns around the level of data sharing with third sector services and the need for a GP SCI referral to this service for patients without established heart disease. Members heard a response was awaited from the service.

Action: Establish if referral removes drug history and past medical history. Contact the service lead for response.

4. Report of the Psychiatric Advisory Group meeting held on Wednesday 6th September 2017

Noted.

5. Report of the Appraisal Steering Group meeting held on Thursday 28th September 2017

Noted.

6. Report of the Referral Management Group meeting held on Tuesday 26th September 2017

Received.

Computerised CBT (cCBT)

Members heard that cCBT will be funded by the Scottish Government and eventually rolled out across Scotland. The aim was

to create the same service level across Scotland. Members were told that the 'Beating the Blues' is the system to be used. The GP Subcommittee heard that the service will be piloted and evaluated before roll-out.

Endoscopy:

It was agreed to raise the patient journey in Endoscopy and Colonoscopy with the Interface.

Action: Improving patient journey to Interface.

7. Report of the GMS eHealth Group meeting held on Thursday 28th September 2017

EDT Transfer

The GP Subcommittee heard that IT Support was proposing to increase the transfer rate of EDT from two or three times a day to once an hour. Benefits include correspondence arriving more quickly to practices and system problems being caught earlier.

Action: Happy to support.

Influenza Searches

The GP Subcommittee heard that recent problems with EMIS and flu reports had been resolved. Members noted that part of the problem was SPIRE flu reports had caused a delay in systems. Members heard that SPIRE was still in the testing and pilot stage. Members were advised that PSD would accept SPIRE reports for payment purposes which was welcomed as it would lead to less administrative work for practices.

**GP REPRESENTATION
REQUIRED: 17/031**

(a) Respiratory MCN and Primary Care Respiratory

Action: Circulate details to GP Subcommittee once meeting date, timing and location have been confirmed.

Dr Raymund White will confirm if able to attend Primary Care Respiratory.

(b) Interpreting Pilot Group – Deputy only

Action: Circulate details to absent members.

(c) Sexual Health Clinical Services – Deputy only

Action: Circulate details to absent members.

**NOTES AND REPORTS
OF MEETINGS 17/032**

**(d) Report of the Sexual Health Clinical Services Short Life
Working Group meeting held on Wednesday 4th October**

Received.

The GP Subcommittee discussed the drift of travel of the Sexual Health Clinical Services review and the potential for unintended consequences for GPs if there is a transfer of work to Primary Care.

Discussion then focussed on the role of GPs within HSCP hierarchy with Mr Williams affirming that lots of non-voting members feed into HSCP statutory Integrated Joint Boards (IJBs). Members heard however a separate issue was ensuring that GPs were represented on local HSCPs and feeding into the system. Mr Williams acknowledged that the GP Subcommittee should be involved in that process especially and was happy to take back if this was not the case. Members welcomed this recognition of the elected statutory advisory body. Discussion took place around closer working and it was thought it would be constructive for Office Bearers of the GP Subcommittee to meet with the HSCP Chief Officers.

Action: Medical Secretaries to contact Mr Williams to arrange meeting.

**(e) Report of the HIV Prevention, Treatment and Care Group
meeting held on Wednesday 2nd August 2017**

Received.

Pre-exposure prophylaxis (PrEP) Update

Members noted that the Sandyford will send PrEP information to GPs but only with express patient consent as some patients did not

wish their GPs to know their status.

Members noted that the Sandyford clinic did not have a defined service area and was accessible by patients from other Health Board areas.

Action: Mr Williams undertook to look into how this extended service is funded.

Subsequent to meeting Mr Williams confirmed that cross boundary access to Sandyford services is funded by the patients' own Health Board.

HEALTH SOCIAL CARE (a) HSCP Update
PARTNERSHIPS
17/033

Cluster Working

The GP Subcommittee discussed clusters and the work being undertaken by them. Members heard that local agreements and policies which change board-wide working practices can cause other feeder areas difficulties and fragment services.

Members noted that in some areas local services were regularly attending cluster meetings at the invite of HSCP management which was not following agreed national processes.

The GP Subcommittee welcomed the GGC organised CQL events to which the GP Subcommittee was invited as they provided an opportunity to share information. Members heard that material was being developed and PC Intelligence Group was looking at how it could assist in developing clusters.

Mr Williams told members it was a question of balance and there was an opportunity to develop relationships between practices and learn to be different and integrate and was not about structural change.

HIV

Mr Williams advised members that Glasgow City HSCP was close to opening a safe drug consumption site in Glasgow. The HSCP was waiting on legal counsel but was hopeful it will be able to take this initiative forward when the legal decision is made. Members noted

this would be the first site of this nature in Scotland.

Regional Planning

Mr William spoke about regional planning and how this was looking at how some services would be delivered locally with some services delivered on a regional basis. The Health Board's Transformation Programme had developed a paper looking at how Board takes forward its healthcare planning.

**CHANGES TO THE
MEDICAL LIST: 17/034**

(a) Inclusions, Mergers, Resignations, Retirals

Noted.

AOCB: 17/035

There was no further competent business.

**DATE OF NEXT
MEETING**

The date of the next GP Subcommittee meeting is **Monday 27th
November 2017.**

The date of the next Executive meeting is Monday 6th November 2017.