

[Private & Confidential]

GREATER GLASGOW & CLYDE AREA MEDICAL COMMITTEE
General Practitioner Subcommittee

MINUTES of the MEETING of the
COMMITTEE held on 15th
April 2019 in the Committee's
offices at 40 New City Road,
Glasgow G4 9JT

SEDERUNT: Drs Ronnie Burns, Maureen Byrne, Vicky Clark, Mark Fawcett, Andrew Fitchett, Gordon Forrest, Sheena Fraser, Norrie Gaw, Kayleigh Gray, Michael Haughney, John Ip, Susan Langridge, John Kyle, William Macphee, Alan McDevitt, Chris McHugh, Kathryn McLachlan, Hilary McNaughtan, Christopher Mansbridge, Steven Miller, Paul Miller, Patricia Moultrie, Kerri Neylon, Alex Potter, Michael Rennick, Paula Rogers, Paul Ryan, Mohammed Sharif, Samir Shukla, Jasmeet Singh, Mark Storey Alastair Taylor, Blair Walker and Raymund White.

CHAIR: Dr Alan McDevitt Chair of the Committee chaired the meeting.

APOLOGIES: Apologies for absence were received from Drs Gayle Dunnet, Graeme Marshall and David Taylor.

Dr Ron Alexander, Hospital Subcommittee Representative.

ATTENDING: Mr David Leese Chief Officer (CO) Renfrewshire HSCP and Lead CO for Primary Care.

Mrs Mary Fingland, Secretary to the GP Subcommittee.

MEMBERSHIP OF THE COMMITTEE: (a) **Election of Chair and Vice-Chair**

Dr Alan McDevitt was elected as Chair of the GP Subcommittee. Dr Maureen Byrne was elected as Vice-Chair of the GP Subcommittee. Dr Vicky Clark was elected as Treasurer to the GP Subcommittee.

(b) **Election of Ordinary Members of the Executive Committee**

Drs Ronnie Burns, Mark Fawcett, Hilary McNaughtan, Michael Rennick and Raymund White duly elected as ordinary members of the Executive Committee. Dr Alastair Taylor as retiring Chair will attend the Executive Committee as ex-officiis for a period of one year.

(c) **Chairman's Opening Statement for the 2019/20 Session**

The Chair welcomed members to the new session of the GP Subcommittee and referred members to the Chair's opening statement which had been tabled.

Chair's Opening Statement

Members should be mindful that the role of a committee member is not a passive one.

Members should prepare for meetings to enable you to participate fully in debates and should read carefully the agenda and papers pre-meeting as there are reports which will not be discussed but accepted as read unless a member submits a comment or query to the LMC office prior to the meeting. Members should also look to those reports that require specific consideration or action by the full Committee. These are listed separately on the agenda as notes and reports of meetings (for action).

Members should be mindful that when attending the GP Subcommittee that you are attending as representatives of your constituency and the diversity of the populations and practices that the constituency encompasses and not just your own practice.

Members will be asked for consent to share their email addresses with their constituents so that constituency matters may be raised directly with members and addressed by the GP Subcommittee offices if needed.

Members may be asked to attend meetings or conferences on behalf of the Committee and should provide a written report of the event to the committee. The GP Subcommittee has a standard report summary form and members are encouraged to use this.

Members should be mindful that when attending other meetings/conferences on behalf of the GP Subcommittee that you remember you are there to represent the views of the whole GP Subcommittee and not your own. It is therefore important for members to ensure you understand the GP Subcommittee position before attending a meeting.

When representing the Committee it is important for members to make it clear that your presence on a committee or group is to help advise on what the GP Subcommittee might find acceptable but that anything having a significant effect on General Practice should be submitted to the main Committee for approval.

In addition, members when attending either the GP Subcommittee or other meetings as a representative must remember who you are representing and be aware of any conflict of interest. Any such conflict should be declared before a debate and it is at the discretion of the Chair whether a member can stay and contribute or be invited leave while the debate occurs. It is however recognised that those members with other interests may well have worthwhile contributions to add.

Conflict of interest should be declared annually and these forms will be sent out at the start of each session.

Members should be aware of the claims process for GP Subcommittee representatives attending Board meetings. There are two forms one for the fee to be paid directly to the practice and one where payment can be made directly to the individual. These forms need to be authorised at the meeting and submitted to the Board for payment. Members should also be aware it is worthwhile keeping a record to ensure payment has been received. Currently the fees reimbursed are £210 for a daytime session and £150 for an evening. Any queries you may have on the process should be directed to Mrs Fingland.

Members are reminded that all GP Subcommittee documents are subject to Freedom of Information (FOI) including GP Subcommittee minutes which we publish on LMC website.

ACCEPTED: 19/001

- (a) Report Primary Care Prescribing Management Group Thursday 7th March 2019**
- (b) Report Hospital Subcommittee 5th February 2019 Community Treatment and Care Centres Group Thursday 14th March 2019**
- (c) Report Area Medical Committee Friday 15th March 2019**
- (d) Report Prescribing Interface Group Tuesday 12th March 2019**
- (e) Report Hospital Subcommittee Tuesday 5th March 2019**
- (f) Report Primary Care Programme Board Tuesday 26th March 2019**
- (g) Report Referral Management Group Tuesday 26th March 2019**

Palpitation Service

A member enquired about low risk patients and the new updated pathway. The member voiced concern about the use of ECG to exclude patients from the Direct Access Palpitation pathway. Members also commented on changes that had already taken place.

Action: Referral Management Group to be informed no changes should occur without GP Subcommittee agreement.

(h) Changes to Medical List Inclusions, Resignations, Retirements

MINUTES: 19/002

The GP Subcommittee received the Minutes of the meeting held on 11th March 2019.

The Minutes of the 11th March 2019 were approved and signed by the Chair.

**MATTERS ARISING:
19/003**

- (a) Sandyford Sexual Health Services**

Correspondence from David Williams Chief Officer Glasgow City and Host HSCP for Sandyford Services and John Brown Chair Greater Glasgow and Clyde Health Board in response to GP Subcommittee concerns was tabled.

Members were given a summary of the content of both letters. Members heard the service would like to attend either the May or June GP Subcommittee to discuss the content of its final review paper. Members expressed an interest to discuss this further with the service. Members would like a response from the service to the following questions:-

- When are the temporary suspensions of service to end? Members suggested that should these suspensions become permanent then funding should be redirected to GP practices.
- What measures is the service undertaking on recruitment.
- What measures is the service undertaking to address its long waiting times especially for patient who need to be seen urgently and symptomatic? Members reported patients not being seen by the service for several months.

A member suggested compiling a list of questions for the service in advance of it attending the GP Subcommittee. Members were asked to submit questions on Sandyford Sexual Health Services to the office.

(b) Gender Prescribing Proposal

Members noted a further meeting will take place with the GP Subcommittee to discuss this proposal further.

GP SUBCOMMITTEE: (a) GP Subcommittee Scottish Government Funding 19/004

Members were given an update of the process agreed with the Board regarding 2018/19 and 2019/20 Quarter 1 GP Subcommittee funding.

NOTES AND REPORTS OF MEETINGS (FOR DISCUSSION): 19/005

(a) Report Primary Care Prescribing Summit Thursday 7th March 2019

Received.

ONS Service and PC Implementation Planning (PCIP) Funding

Members agreed it was not appropriate to fund this service from PCIP monies.

Action Point: Feedback not appropriate to use new GP funding for an existing service's development and/or roll-out.

**(b) Report Community Treatment and Care Service Board-wide
Group Wednesday 10th April 2019**

Received.

Premises Development

Members heard alteration works required to meet accommodation standards in non-owned Board premises and how these are arranged and funded may be an obstacle. Mr Lease told members he was happy to explore this issue as the Board does have some funding discretion which may possibly apply for remedial works that bring rooms back into clinical use. Members noted many Health Centres were currently either being redesigned and/or rebuilt with rooms available as a result.

Action Point: Take back the issue of premises development and remedial works and improvement grant funding to the Primary Care Programme Board.

A member expressed the view that PCIP funds should not be used for premises development as infrastructure costs could be quite substantial. Members also heard for example that in East Dunbartonshire HCSP there are no community rooms and the treatment rooms in the area are all located in private premises. Members heard a strategic premises meeting would be taking place in May and premises issues for new extended multidisciplinary teams would be explored at that meeting. Members noted the national premises survey should report in May with information sent to each Board area.

Action Point: Premises update to be included in the GP Subcommittee agenda following the premises meeting in May.

GP CLUSTERS:19/006 (a) GP Subcommittee Communications Strategy

Members heard progress was being made with the GP Subcommittee's communication strategy. Members noted the CQL Listserver had also been reinvigorated and IT support was looking into the 'spoofing' issue with the CQL group email address. A member wondered whether the use of a communications app such as 'WhatsApp' might solve the problem. Another member mentioned using Trello for group chats but unfortunately neither app was supported by the Board's IT team.

Action Point: Raise the issue of use of apps with eHealth Group.

PRIMARY CARE

Standing agenda item. No update.

**IMPLEMENTATION
AND TRANSITION:
19/007**

**CHANGES TO THE
MEDICAL LIST:**

(a) Application to vary Practice Area: Practice 87541

The Committee noted the application from practice 87541 to vary its current practice area and its proposed new practice area. The GP Subcommittee also noted that no patients would be removed as a result of the proposed change.

After discussing the proposal from the practice and noting the difficulties the practice was facing accessing community services in a neighbouring HSCP area, the GP Subcommittee agreed to take no exceptions to the proposal.

(b) Application to vary Practice Area: Practice 87108

The Committee noted the application from Practice 87108 to vary its current practice area and its proposed new practice area. The GP Subcommittee also noted that no patients will be removed as a result of the proposed change.

After discussing the proposal from the practice and noting that G53 lies in the South Sector of Glasgow City HSCP the GP Subcommittee took no exception to the removal of G53 from the practice area. However, in the case of postcode area G77 the GP Subcommittee noted the substantial number of housing developments planned within the G77 area and the lack of GP provision within that area to fully accommodate new housing on such a scale. The GP Subcommittee therefore concluded that until such times as additional GP provision is in place it would not be appropriate to remove this postcode from the practice's current area at this juncture.

Mr Leese advised members that the Scottish Government has written out to Local Authorities that there is an expectation that Health Boards would be seen as a consultative partner and the impact on existing GP practices considered during the planning stage. Members heard there were 2 large developments areas in East Renfrewshire and Renfrewshire and for the first time the Health Board has been consulted at the beginning of the planning process. Mr Leese undertook to share information at the Premises meeting on Tuesday 14th May and forward to GP Subcommittee Office Bearers.

Action Point: Information on new planning process to be shared at the Premises meeting on Tuesday 14th May and forwarded to GP Subcommittee Office Bearers.

AOCB: 19/010

There was no further competent business.

**DATE OF NEXT
MEETING**

The date of the next GP Subcommittee meeting is **Monday 20th May 2019**.

The date of the next Executive meeting is Monday 29th April 2019.