

MINUTES
Videoconference Meeting of the GP Subcommittee
on Monday, 17th January 2022 at 7.30pm

Sederunt

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

Chair

Dr Alan McDevitt CBE, Chair of the Committee

Attending

- Marco Florence, Secretary to the Committee
- Elaine McLaren, Administration Assistant for the Committee
- Lorna Kelly, Interim Director of Primary Care, NHS Greater Glasgow and Clyde
- Dr Kerri Neylon OBE, Deputy Medical Director for Primary Care, NHS Greater Glasgow and Clyde
- Susanne Millar, Chief Officer, Glasgow City HSCP

Apologies

Drs Gayle Dunnet, Gordon Forrest, Parisa Ghanbari, Graeme Marshall
Dr Ron Alexander, Hospital Subcommittee Representative

Minutes GP Subcommittee

21/70

1. Draft Minutes of the GP Subcommittee, 20th December 2021
The draft minutes were approved by the GP Subcommittee.

Matters Arising

21/71

There were no matters arising.

GP Subcommittee Election

21/72

Members were reminded that papers had been issued by the board and that the office had issued a reminder of who is due for re-election this year and those members whose terms end in 2024. It was also highlighted that the medical directors are available to assist with any enquiries regarding joining the committee or taking on roles as GP Subcommittee/LMC representatives on external groups.

Long standing members Dr Alex Potter and Dr Raymund White were thanked for their contributions.

Covid-19 GP Escalation

21/73

1. GP Workload Update

Workload and workforce pressures in GP practices remains at high levels. The national data collection of GP activity levels is ongoing. The LMC is also undertaking work to collate data on the activity levels around Covid work taking place in practices.

At the Primary-Secondary Care Interface, the GP Subcommittee has again requested that data on secondary waiting lists be made public so that the public can access this information.

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There are a few practices at level two escalation and one at level three. A practice has also recently moved from a GMS contract to being a 2C practice.

Covid-19

21/74

1. Community Pathway Update

Whilst there have been high numbers of Covid infections in the community in recent weeks, there has been a small reduction in CAC attendances and the position is now that the CACs are unlikely to be overwhelmed.

Options are being considered for the future of the community pathway and provision of assessment of acute Covid illness in the community. However, there will continue to be a need for a board delivered community pathway in the short term. While the 111 Covid helpline pathway is in operation-the health board and SGPC have made clear that it would not be appropriate for NHS 24 to have direct access to general practice appointments.

The respiratory guidance issued in December is a concern for practices and difficult to implement whilst maintain access to non-respiratory pathway patients. Considerable consultation and time would be required to allow practices to consider changes and support which would be required to allow them to possibly see patients with Covid or suspected Covid illness in the future. Infrastructure, IPC measures, PPE, workforce, expertise and access to expert guidance amongst other issues may be required.

The committee will start to discuss with practices and the board the possibility that beyond March changes will be made to the community pathway within GGC. Discussion will take place about how the resource currently deployed to deliver the community pathway can be utilised to support practices if the activity moves from the pathway to practices in the future. However, in addition, within those discussions consideration must be given to how a future escalation of case numbers would be detected and responded to with support from the board. Other logistical issues will need to be considered should the plan be for Covid patients to be seen in practices, as will the expertise that has been built up by the staff who have been working in the CACs. The issue of data surrounding Covid workload levels was highlighted. The ongoing benefits of having the Covid escalation framework were noted.

Flu and Covid Vaccination Programme 2021

21/75

The Covid booster programme was accelerated. It was felt that the board managed this well.

Notes/Reports from Meetings

21/76

1. Primary Care Evaluation Group, 26th November 2021

This report was noted by the GP Subcommittee.

2. Primary Care Health Intelligence group, 2nd December 2021

This report was noted by the GP Subcommittee.

3. Child & Maternal Health Strategy Group (CMHSG), 2nd December 2021

This report was noted by the GP Subcommittee.

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4. Respiratory MCN, 6th December 2021

There are long waits for spirometry.

Action Point: Medical Directors to consider any possible further steps regarding this.

5. Covid-19 Vaccination Programme Board, 13th December 2021

This report was noted by the GP Subcommittee.

6. Childhood Immunisation Group, 13th December 2021

The need for ease of access to data on vaccinations done outwith practices was highlighted.

7. Hospital Paediatric/Primary Care Interface Group, 14th December 2021

Feedback is to be sought at the group's next meeting around the comment about the maternity service feeling that work is being shifted to them from primary care.

8. Pharmacotherapy and PMG meeting, 16th December 2021

It was noted that there are concerns around the Valproate safety information from ADTC and that the solution is far from ideal.

9. Area Medical Committee, 17th December 2021

This report was noted by the GP Subcommittee.

10. Changes to Medical List

This report was noted by the GP Subcommittee.

8. PCIP Implementation

21/77

1. CTAC

A discussion was had on the paper. It was noted that acute are looking to have their phlebotomy service delivered in the community. It has been made clear that this must be delivered in parallel and must not hinder the rollout of the CTAC service or take up the capacity of the CTAC. It was suggested that there may be an advantage to setting the framework before secondary care's service is progressed. Another concern highlighted was the location of CTAC services, with a particular focus on inequalities with regard to people needing to travel to centres.

Out of Hours GP Service

21/78

Those GPs who had staffed the Out of Hours GP service over the festive period and also throughout the pandemic were thanked by the chair. The staffing over the festive period was better than had been expected. Rates were raised for this period. Anecdotally, the Festive Care Home LES was thought to have been of benefit.

Sessional GPs

21/79

The LMC is working on its next development session for sessional GPs. The work of sessional GPs in the CACs was acknowledged.

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Documents Requiring a Response

21/80

1. Methotrexate Shared Care Agreement (SCA)

There is a lack of a note of side effects having been discussed by secondary care and the patient. The GP Subcommittee was otherwise content with this proposal. However, more generally, concerns raised about shared care agreements and the lack of paperwork that is coming through in relation to them.

Action Point: Response regarding proposal needs sent and consideration to be given regarding SCAs generally

2. Psychotropic Monitoring Draft Guidelines- Primary Care

The guidelines were felt to be complex and would require a dedicated service to deliver. The GP Subcommittee felt that this monitoring was important but moving this to general practice would be a significant shift in workload and would not be appropriate or supported. The committee were reassured by the board that this was not the intention and the group were working on what monitoring was required with no agenda that this would be within GP.

Action Point: Comments about the paper to be fed back to the working group

Any Other Business

21/81

1. Public Holidays

It was confirmed that the LMC is in ongoing dialogue with the board about the public holidays for 2022. There is a national decision for the NHS awaited regarding the Queen's Platinum Jubilee celebrations.

2. Unvaccinated Staff

It was noted that the rules on unvaccinated staff that are coming into force in England do not affect the NHS in Scotland.

Next Meeting of the GP Subcommittee-7.30pm, Monday, 21st February 2022

Next Meeting of the GP Subcommittee's Executive-7.30pm, Monday, 7th February 2022