

July Issue

# Newsletter

GLASGOW LOCAL MEDICAL COMMITTEE LIMITED.

## New GP Contract Implementation

The core aim of the 2018 GP Contract is to reduce current GP workload. It will deliver this by moving services such as immunisations and treatment room tasks out of general practice allowing existing practice staff to take on new responsibilities, and by providing alternatives to the General Practitioner as first point of contact through expanding the healthcare team looking after patients.

The local plans to deliver the new service provision and extended multidisciplinary teams for each HSCP are the Primary Care Improvement Plans (PCIPs). The LMC and GP Subcommittee are working with each of the 6 Health and Social Care Partnerships (HSCPs) drawing up plans initially for the period 2018-19. The PCIPs must have the agreement of the GP Subcommittee before it is submitted to the Integrated Joint Boards for approval.

We have GP Subcommittee representatives in each of the 6 areas working with the HSCP developing these plans. The Medical Directors support these

reps to ensure that each of the 6 plans fulfil the commitments of the GP contract by addressing the priority areas agreed both locally and nationally and to ensure that all spend of the new monies provided nationally in direct support of general practice is being tracked and spent appropriately.

## Implementation Meeting for GP Partners

The LMC recognises that the implementation of the new contract is complex and that contract holders require an opportunity to be informed of local progress and to ask questions. The LMC therefore invites all GP contract holders only to an information meeting to discuss the development process of the PCIPs and local implementation of the new contract.

The meeting will be held on Thursday 30th August at the Deeprose Lecture Theatre (Govan Mbeki Building) Glasgow Caledonian University. The lecture theatre sits up to 200 people. To help us with numbers for the catering please register your attendance via our Eventbrite [link](#):

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Contact: telephone 0141 332 8081 or email [admin@glasgow-lmc.co.uk](mailto:admin@glasgow-lmc.co.uk)



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## Ambulance Ordering

We are aware that there is significant concern locally regarding ambulance response times. The concern of local GPs was raised directly by the Committee to the Medical Director of the Scottish Ambulance Service recently. We would like to remind GPs of the various telephone numbers that are in use for the ordering of ambulances for patients. We have also included in our email the Scottish Ambulance Service "A Guide to Booking an Ambulance" and it can also be found in the GPs section on the homepage of our website [www.glasgowlmc.co.uk](http://www.glasgowlmc.co.uk)

Some GPs have told us that they have programmed the numbers into their phone contacts or have taken a picture of the page for easy access.

## Supply of Medicines Following Specialist Review- Mental Health

The Mental Health Service has produced further guidance on the supply of medicines following specialist review. This followed feedback from GPs around difficulties in communication from out-patient clinics and patients'

expectations. A standard out-patient form will be used which will make it clear about timescales and whether the medication replaces or is in addition to existing medication. This proforma should be in use by all specialists requesting supply of medicines following review and we attach a copy of this for your reference.

The accepted timescale for medicines following all specialist review is-

- Non-urgent (routine): at least 48 hours
- Urgent: Within a few hours, if possible same day.

We accept that in certain and infrequent circumstances, an urgent prescription will be required. In all of these cases, we expect that will be a direct contact usually a phone call between the clinician to the GP to discuss the prescription and the timescale, this will then be followed up by transmission of the agreed proforma containing medication details by secure email. In these cases, the clinician will make the patient aware that the prescription

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may take several hours to be available.

## Oxygen Contract for GP Practices

The supply of Oxygen to GP practices has been agreed by Scottish Government and is now within the new GP Contract. If you have having any difficulties in getting your supply, have any comment to make regarding sufficiency of supply or are experiencing any problems with the supplier, please let the LMC know.

## Closure of Sandyford Services

The LMC is concerned about the recent closure of some Sandyford clinics and the potential impact of these closures on GP practices. We are worried that when clinics are closed either temporarily or permanently, some patients will go to the GP practices for their contraceptive and/or cervical cytology rather than attend an alternative Sandyford service. Also we know that certain clinics are open but are experiencing long wait times for appointments resulting in patients going to the GP practice.

The Sandyford Service closures that we are aware of-

## Sandyford North

Closed on **Mondays** and **Thursdays** until further notice.

## Sandyford Johnstone

Closed until further notice

**All Sandyford clinics are closed on the public holiday, Monday 16th July 2018.**

We would like to hear from practices, especially those near to Sandyford closures, if there has been any increase in patient demand that you have seen. It would be very helpful in your feedback if you can indicate where your practice is, if there has been a Sandyford clinic closure near you, and what type of workload you have seen increased.

## IT Updates

### GP IT Re-provisioning

The Invitation to Submit Final Bid went out on 2nd July to the suppliers.

The current timetable is that the bids will be evaluated in Sept/Oct and the Contracts will be awarded in Oct/Nov. The implantation of the

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service requirements will begin in Nov 18 and is expected to take 12 months until Nov 19. The so-called “mini-competition” to choose clinical systems will be in Dec 19. System change at practice level will be from April 2020 onwards.

**SPIRE** Local has been rolled out across GGC. All practices can access the local reports that are based on your practice data only. There is no definitive date for the national data programme as yet.

**GP2GP** This is rolling out very slowly indeed with only a handful of practices enabled. The system requires DOCMAN 75500 to be installed which has not been the easiest of upgrades for practices and the IT department to manage.

**Information Sharing Short Life Working Group** This national group has now reported on issues facing GP practices about sharing of patient data and responsibility.

The report is published on the Scottish Government website: <http://www.gov.scot/Topics/Health/Services/Primary-Care/GP-Contract/Information-Sharing>

We are awaiting further clarification about the issues of Data Protection Officers, Data Sharing Agreements and also Joint Controller Agreements.

## GDPR – Short BMA SARs Survey

Dr Paul Cundy GPC's IT Policy lead is evidence gathering to assess the SAR issue UK wide. Below is a link to a short SurveyMonkey on the number of SARs post 25th May 2018.

<https://www.surveymonkey.co.uk/r/Number-of-SARS>

We know this is a burning issue for many practices in GGC and if each practice could complete it, preferably by the person most likely to know the answers, so not necessarily a doctor, contractor or partner Dr Cundy would be very grateful.

## From the Team at the LMC

Dr Alastair Taylor Chair  
Dr Mark Fawcett Vice-Chair  
Dr John Ip Medical Director  
Dr Patricia Moultrie Medical Director  
Mary Fingland Business Coordinator  
Elaine McLaren Admin Assistant

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Appendix 1

## MEDICATION HAND-WRITTEN NOTE

*Enter relevant location*  
**Health and Social Care Partnership**

Address  
Tel:



Dear Dr .....

Date: .....

**Patient:**

**CHI:**

Your above named patient has been seen at the duty/outpatient clinic today.  
Would you please prescribe:

<input type="checkbox"/> Urgent (within 48 hours) (*phone practice prior to emailing confirmation)	<input type="checkbox"/> Routine (Prescription available 48 hours following request)

- ☐ This medication is in addition to/is an amendment to the patient's current regime.  
☐ This medication replaces:


Which the patient is currently taking and which should now be stopped.  
A detailed letter will follow.

Yours sincerely