

MINUTES
Meeting of the GP Subcommittee
on Monday, 20th May 2024 at 7.30pm

Venue-Teams

Sederunt

- Drs Katie Adair, Michael Anderson, Ronnie Burns, Maureen Byrne, Pearce Cusack, Gayle Dunnet, Mark Fawcett, Helen Fox, Sheena Fraser, Georgi Georgiev, Parisa Ghanbari, Ewan Gray, Lynn Howie, John Ip, Sarah Johansen, Waseem Khan, John Kyle, Gillian Leslie, Christopher Mansbridge, Chris McHugh, Brian Milmore, Graham Morrison, Patricia Moultrie, Austin Nichol, Max Peluso, Scott Queen, Dawn Rees, Michael Rennick, Stacy Russell, Victoria Shotton, Jasmeet Singh, Mark Storey, Alastair Taylor, David Taylor and Graham Thompson

Chair

- Dr Mark Fawcett, Chair of the Committee

Attending

- Elaine McLaren, Administration Officer for the Committee
- Marco Florence, Secretary to the Committee
- Dr Ross Scott
- Dr Kerri Neylon OBE, Deputy Medical Director for Primary Care, NHS Greater Glasgow and Clyde

Apologies

- Drs Susan Langridge and Chris McHugh; Dr Ron Alexander, Christine Laverty and Allen Stevenson
- **Members were reminded to declare any relevant conflicts of interest.**

GP Subcommittee/LMC Observers

24/17

- Dr Ross Scott attended the meeting as an observer.

GP Subcommittee/LMC Membership

24/18

1. Member's Resignation

- Dr Graham Morrison will leave his position on the GP Subcommittee/LMC at the end of June. Dr Morrison was thanked for his time on the GP Subcommittee/LMC, having been a member since 2022.

2. Re-dressing the Gender Balance-Co-option

- Following the election, it was agreed by the GP Subcommittee/LMC to undertake some work to redress the gender balance of the membership. A number of vacancies exist across the membership and this is where co-option was to be considered. Dr Maureen Byrne and Dr Patricia Moultrie undertook a session each to engage with the female GPs working in GGC.
- The GP Subcommittee/LMC agreed to co-opt:
 - **South East**
Dr Harminder Baryah
 - **Renfrew**
Dr Alanna Macrae
Dr Gouri Bhat
 - **Eastern**
Dr Catherine Johnston
Dr Sally Al- Agilly
 - **Western**
Dr Harriet Rushworth

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- **Inverclyde**
Dr Joanna Hall
- **Lomond**
Dr Karen Taylor
- The co-option of these eight GPs will see the proportion of female members rise from just under 40% to just under 50%.
- Consideration will be given to the feedback from these sessions ahead of the next election in 2026.

Notes and Reports from Meetings
24/19

<u>Report Number</u>	<u>Group</u>	<u>Date of Meeting</u>
1	GP MDT	14 th March 2024
2	PC Public and stakeholder engagement group	14 th March 2024
3	Escalation Framework and Contingency Planning Sub-Group	8 th April 2024
4	Referral Management Group	9 th April 2024
5	GP Clinical Systems Re Provisioning Programme Board	11 th April 2024
6	Adult Vaccination Group	16 th April 2024
7	Cervical Screening Steering Group	18 th April 2024
8	Area Medical Committee	19 th April 2024
9	ADTC	22 nd April 2024
10	Gender Identity Programme Board	23 rd April 2024
11	GMS Premises Group	24 th April 2024
12	GMS eHealth Steering Group	25 th April 2024
13	GP Editorial Board	2 nd May 2024
14	Primary Care Monitoring & Evaluation & Intelligence Group	7 th May 2024
15	Primary care Sustainability and Practice support group	8 th May 2024
16	ANIA Digital Dermatology	9 th May 2024

- 24/19.4 and 10-Referral Management Group/Gender Identity Programme Board
- A query was raised regarding the self referral option for gender identity services being removed.
- This is part of a review of the service. The Sandyford Clinic believes that it is important that patients who require CAMHS/psychiatry get care from the appropriate service.
- However, it is likely that the service will continue to be reviewed in light of the Cass Review and the Scottish Government's response to that.
- The executive is of the view that long waiting lists should not lead to self referral pathways being removed.
- 24/19.8-Area Medical Committee
- A request has been sent to the Chair of the Area Medical Committee for a discussion on the workload and costs related to new drugs.

Minutes GP Subcommittee
24/20

1. Draft Minutes of the GP Subcommittee, 15th April 2024
- The draft minutes were approved by the GP Subcommittee.

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2. Draft Minutes of the GP Subcommittee's Executive, 13th May 2024
 - The draft minutes were noted by the GP Subcommittee.

Matters Arising

24/21

1. Vaccination Transformation Programme Board, 13th February 2024
 - A query had been raised regarding vaccination rates at the April GP Subcommittee meeting.
 - Similar to Covid, performance Flu has seen a reduction in attendance with uptake reducing to a level similar percentage to that of pre pandemic.
 - From September, 34 drop in sessions took place for all health care workers either on the mobile bus or on acute sites with ward roaming teams. Roaming vaccination teams also visited during night shifts to drive uptake. Increased communications through payslips, clinical system banners, core brief, Staffside and HR promotion as well as staff only community clinics were adopted during September to January.
2. Alcohol and Drugs Recovery Service
 - The GP Subcommittee had been informed that the recommendations of the Shared Care Review had been paused owing to the board requiring to explore a financial framework for it.
 - Glasgow City HSCP based practices have however contacted the office regarding potential changes to the service impacting on the support practices and patients will receive from ADRS.
 - It had been understood that Glasgow City IJB was to consider a proposal on 15th May regarding changes to the Alcohol and Drugs Recovery Service in Glasgow City HSCP. However, the publicly available papers do not have details on the proposal.
 - It is understood that any proposal only currently affects Glasgow City HSCP.
 - There were reports of practices not having access to an ADRS worker for a number of years and GPs therefore deciding to withdraw from the enhanced service. There were also reports of GP practices only recently regaining access to an ADRS worker. Members also noted that the frequency of access had been reduced for their practice.
 - Members outlined that the service that is currently provided by the ADRS workers is holistic and leads to strong relationships with patients. There is a concern that changes to service provision may lead to vulnerable patients being lost to follow up and deterioration in care.
 - The input of the ADRS workers is highly valued.
 - Members raised queries about the mechanism for leaving the enhanced service. If a practice withdraws with the required notice period, it is for the HSCP to put in place alternative arrangements.
 - Following the discussion at the executive meeting on 13th May, an email has been sent to the Interim Chief Officer at Glasgow City HSCP, Jackie Kerr. Clarity is required for the GP Subcommittee on the proposals, so that the GP Subcommittee can be informed, and advice can be provided to the HSCP from the GP Subcommittee.
 - The Deputy Medical Director for Primary Care outlined her willingness to be involved in discussions regarding the proposal.

GP Practice Workload & Sustainability

24/22

1. GGC GP Sit Rep, 9th April 2024-14th May 2024

Date	0	1a	1b	2	3	4	5	list closures
09/04/2024	0	165	50	10	0	0	0	6
16/04/2024	0	156	60	9	0	0	0	5

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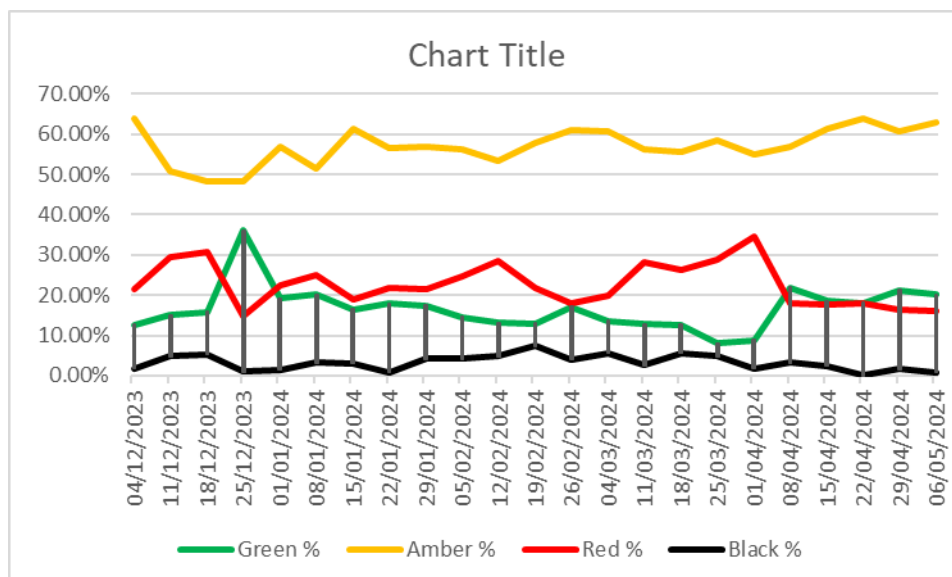
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23/04/2024	0	140	74	11	0	0	0	6
30/04/2024	0	139	75	11	0	0	0	6
07/05/2024	0	138	76	11	0	0	0	6
14/05/2024	0	135	78	12	0	0	0	7

- This report was noted by the GP Subcommittee.

2. LMC GP Practice Situation Survey, 1st April 2024-6th May 2024

Week Beginning	Green	Green %	Amber	Amber %	Red	Red %	Black	Black %	Total Responses
01/04/2024	10	8.85%	62	54.87%	39	34.51%	2	1.77%	113
08/04/2024	27	21.95%	70	56.91%	22	17.89%	4	3.25%	123
15/04/2024	23	18.55%	76	61.29%	22	17.74%	3	2.42%	124
22/04/2024	23	18.11%	81	63.78%	23	18.11%	0	0.00%	127
29/04/2024	26	21.31%	74	60.66%	20	16.39%	2	1.64%	122
06/05/2024	25	20.16%	78	62.90%	20	16.13%	1	0.81%	124



- This report was noted by the GP Subcommittee.

PCIP

24/23

1. PCPB Strategic Group, 18th April 2024

- This report was noted by the GP Subcommittee.

Sessional GPs

24/24

- A meeting will be arranged for the annual review of the Glasgow Locum Group's service level agreement.

Changes to Medical List

24/25

- This report was noted by the GP Subcommittee.

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Documents Requiring a Response

24/26

1. Desonumab SCA

- The response to the GP Subcommittee following its consideration of the proposed changes to the Shared Care Agreement was discussed by the GP Subcommittee.
- It was noted that calls have been made for some time for secondary care to undertake DEXA recalls, so it was queried if it could be done in relation to this SCA why it could not be done for other areas of care. The GMS eHealth Steering Group is giving consideration to this.
- Many patients on Desonumab are housebound and therefore have this administered to them by district nurses. It was highlighted that there may need to be consideration of the mechanism of the communication detailing when administration takes place.
- This is an existing SCA and there were comments that some of the amendments may be an improvement on the service.
- **Action Point: Provide feedback**

2. Neurodevelopmental Disorders Paper

- The GP Subcommittee had a discussion on this paper, with options for service changes.
- The committee expressed disappointment that the options paper despite describing the lengthy waiting times for referrals, indicated that there was to be no additional funding for the service. All three options detailed were felt to be less than ideal. Options one and two were rejected by the GP Subcommittee. Of the three options presented, the GP Subcommittee concluded that option three would be the preferred option. This would result in referrals for adult ADHD rejected by the service following triage. However, the GP Subcommittee is of the view that secondary care must take ownership for the rejection of these referrals and also communicating with patients about this.
- The service has long waiting lists and these continue to increase in number.
- A discussion was had on the merits of stating that there would be no service provided for adults.
- Concerns were outlined that this would be a failure to provide a service given that there are recognised diagnostic conditions for ADHD.
- It was felt that none of the three options would lead to an improvement in the service.
- The GP Subcommittee is of the view that it is not for GPs to diagnose ADHD and the specialist service should be doing this.
- Clarification is required on the criteria to be used by the service.
- **Action Point: provide feedback**

3. Health Checks for Adults with Learning Disabilities

- A pilot has taken place in Inverclyde and North Glasgow of physical health checks for patients with learning disabilities. Health boards have been instructed to undertake these by the Scottish Government.
- The GP Subcommittee was disappointed not to have been engaged in this work up to this point.
- SGPC and Primary Care leads pushed for these checks not to be undertaken by general practice.
- The pilot was for 12 weeks in Inverclyde and practices reported having a lot of actions to undertake in a short period of time.
- It appears that these checks are leading to a lot of actions for GPs but the board is clear that these checks should not necessarily be resulting in this.
- The board is going to learn from the pilot.
- It is important that realistic medicine is followed and that the actions required are appropriate. It was also queried if the service is necessary for all patients-some could raise concerns with the GP if they had any.

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- It was reported that checks are being undertaken in care homes where patients are already receiving appropriate care.
- It was queried whether the level of unmet needs was any different to what it would be for the wider population.
- There are challenges as there is not a single learning disability register.
- **Action Point: Contact service seeking to engage, including on workload and realistic medicine.**

GP Subcommittee Representation Required

24/27

1. Specialist Children's Services-Neurodevelopmental Services
- Members were advised to contact the secretary if they are able to attend this group on behalf of the GP Subcommittee.

Any Other Business

24/28

1. OOH GP Service
- The OOH GP service has been taken out of special measures. The board's Deputy Medical Director for Primary Care thanked the GP Subcommittee for its engagement on this matter and the GPs who work in the service.
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- **Next Meeting of the GP Subcommittee-7.30pm, Monday, 17th June 2024, Teams**
 - **Next Meeting of the GP Subcommittee's Executive-7.30pm, Monday, 3rd June 2024, Teams**