




South Ayrshire HSCP

GP Locality Forum

Notes from meeting 09/12/21

No	Item	Papers
1	<p>Present: Simon Farrell (chair), Tommy Hunter, Jim Ledger, Stewart McMinn, Chaitanya Mudunuri, Denise Mellon, Michelle Palmer, Tim Eltringham, Claire Muir, Phil White, Donna Dunlop, Glenda Hanna</p> <p>Apologies: Stacey Ross, Phil Hulme, Iain Fulton, Alex McMillan, Liz Roy, Lisa McAlpine, Jamie Warren, Ian Larkin, Jane Hall, Dan Thompson, Nicola Taylor, Maria Bartley, Vicki Campbell, Claire McCamon</p>	
2	Simon welcomed all to meeting	
3	Note of previous (September) meeting – approved – proposed Jim Ledger, seconded Denise Mellon	 South Ayrshire GP Locality Forum Notes
4	<p>Matters Arising:</p> <ul style="list-style-type: none"> • Allocations of additional staff – Claire Muir shared a summary version of a larger spreadsheet setting out existing MDT staffing at Cluster level (and including plans for additional posts) • This was thought to be helpful – there was some suggestions re future distribution (eg additional MSK PT for Ayr/Prestwick Cluster) 	 MDT Resource Allocation per South /
5	<p>Updates:</p> <p>Pharmacotherapy</p> <ul style="list-style-type: none"> • Donna Dunlop provided a short update re Pharmacotherapy • Whilst some experienced staff had left posts they had successfully recruited into posts (for example 3 part time staff recruited into 1.5 wte Carrick role) • The planned Practice visits had had to be delayed because of system pressures <p>MSK PT</p> <ul style="list-style-type: none"> • There are still ongoing plans for recruiting more PT capacity • In addition Yvonne Quinn who manages the service was currently looking at need across all GP Practices to inform future investment <p>MHP</p> <ul style="list-style-type: none"> • There were a reasonable number of MHPs in place and with 2 new starts in January and with plans for further recruitment (potentially utilising new SG funding for Primary Care Mental Health) <p>CTAC</p> <ul style="list-style-type: none"> • Claire Muir provided an update re CTAC • The governance arrangements for CTAC are changing with a new Implementation Group and a sub-group developing a workplan 	

	<p>ANP</p> <ul style="list-style-type: none"> • The ANP Care Homes post is about to go to recruitment for a third time • If this process is not successful there will need to be a different approach to providing additional clinical support <p>OT</p> <ul style="list-style-type: none"> • Claire updated meeting re the GP Practice based OT work with 3 Practices now being supported with plans for a fourth 	
6	<p>Future Investment Plans – developing PCIP (3) Simon reported on Ayrshire-wide meetings linked to new information from SG re PCIP funding use.</p> <p>Essentially, the contractually binding elements of the GMS (Vaccination, Pharmacotherapy and CTAC) are being prioritised at national level (and recognising that some Board areas are far behind with these core parts of the contract).</p> <p>These three components were also ones run directly by NHS A&A rather than HSCPs.</p> <p>There were already plans to ensure that Pharmacotherapy and CTAC services were more resilient (for example, re sickness and Maternity Leaves) at Ayrshire level so this is generally supported in Ayrshire.</p> <p>The vaccination element is less supportable because it was moved from the transfer of a small function from GPs to NHS Board level into more significant Vaccination services needing higher resourcing.</p> <p>There needs to be confirmation from SG of this general movement.</p> <p>There may also be further Primary Care Mental Health funding being made available which might pick up some of the resourcing of additional MHP capacity.</p> <p><i>Recruitment and Retention</i></p> <p>There was a discussion regarding the development of future workforce capacity</p> <ul style="list-style-type: none"> • Tim informed the group of the challenges re workforce supply right across the system and at every level • There was a need to develop greater advanced skill nurses and others and there needed to be focus at an Ayrshire level on this • There were good examples of GPs supporting advanced skills in nursing posts linked to Practices • There was national work ongoing in relation to future GP capacity recognising the lag between training and having an operational GP in place <p><i>Broader HSCP reform and investments</i></p>	

	<ul style="list-style-type: none"> Phil reminded group of the wider positive context and future direction of HSCP staffing and the investments that are being made beyond GMS related posts (such as District Nursing, AHPs and frailty (below)) 	
7	<p>Frailty Project</p> <p>Phil White provided a brief update re the investment in Frailty related work being led by Joanne Payne.</p> <p>We had successfully recruited 3 B5 OTs who would link to GP Practices to support earlier MDT interventions for those with declining frailty</p> <p>The eFrailty/SPIRE tool would be used to predict those likely to need assessment and support.</p> <p>A further 3 wte B5 OTs would be recruited in the New Year.</p> <p>In addition B4 OT Assistants were being recruited to deal with people at earlier stages of frailty.</p>	
8	<p>Community Nursing Review</p> <p>Phil provided a brief update re the Community Nursing Review led by Dalene Steele in Easy Ayrshire HSCP and the linked investments in DNs</p> <p>Tim also highlighted the use of the significant new SG MDT funding (part of the additional Winter funding SG has released) some of which is being used to fund additional qualified and unqualified nursing staff in communities.</p>	
9	<p>Premises</p> <p>Phil updated work on the existing approach to securing additional spaces to support MDT working</p> <p>Claire reported on the work linked to SG monies to support small modification of premises to allow for better MDT working (in letter attached).</p> <p>Tim highlighted the work that was being carried out to escalate the premises risks in Ayr at Board level.</p> <p>Simon had raised the possibility of utilising non-recurrent underspend to support CTAC work including developing a Hub.</p>	 <p>Primary Care - GP Premises Funding 202</p>
10	<p>Cluster Updates</p> <ul style="list-style-type: none"> Jim Ledger provided an update on Ayr/Prestwick Cluster There had been a very useful input at previous meeting re cancer and the early cancer detection service There had been an update from Phil W re MDT situation Ensuring resilience for Pharmacotherapy and CTAC was highlighted There were a range of issues related to CTAC raised (for example carrying out acute related ecgs) Joanne Anderson was to attend next Cluster meeting to address these issues 	

	<ul style="list-style-type: none"> The QI project related to audit work on the 'triple whammy' of drugs to avoid namely NSAIDs in patients already on ACE/ARB and another diuretic <p>There was no-one in attendance to report on Carrick or Troon Clusters although Simon reported briefly, for example, Troon still pursuing the Frailty work</p>	
11	<p>Wellbeing</p> <ul style="list-style-type: none"> Phil White and Claire Muir provided a brief update re the opportunities being pursued in relation to the SG Wellbeing monies for HSCP/Third/Independent and Independent Primary Care Contractors Simon had raised the issue of releasing staff for PLT space to allow for team work and reflection 	
12	<p>Clinical Director</p> <ul style="list-style-type: none"> Tim reported that there were now vacancies for CDs in all 3 HSCPs and that there would shortly be an advert with revised Job Description being issued 	
13	<p>Locality Model</p> <ul style="list-style-type: none"> It was agreed to share the general strategic direction for HSCP services and the locality focus more fully at the next Forum meeting 	
14	<p>Communications</p> <ul style="list-style-type: none"> The issue of public communication relating to GP Practices and wider Primary Care was an issue needing addressing at different levels including national, NHS A&A wide and at HSCP and even more local level 	
	<p>AOCB</p> <ul style="list-style-type: none"> Arrangements for GP payment for attending Forum Simon reminded attendees that they were able to claim fees for attendance at on-line GP Forum meetings and that this could be backdated recognising attendance throughout last year 	

Dates of meetings to be set for 2022