



RECENT NEWS

Welcome to the LMCSN Newsletter!

The LMCSN team will keep you updated on key topics, provide regular summaries of discussions from the Whatsapp group and forum, and share recent additions to the website

LMCSN Actions

LMC Support Network Membership

Mariah and Rebecca will be going through the membership list and will contact relevant LMCs to ensure those registered are still associated with your LMC. Going forward please could you also [let us know](#) if any LMC members/staff have left so we can update the membership accordingly.

Help us to help you survey

[Please complete the following survey](#) which is designed to gather information that will benefit the LMC community. It consists of three sections: Directory of Services, Occupational Health, and Practitioner Health.

LMC Databank

The DataBank will be offline for a few days starting 30 March for essential upgrades. The work is timed for the Easter holidays to minimise disruption.

If you're finding the DataBank helpful, and you've got any neighbouring LMCs who you think might find it useful, please contact lmcadmin@bhlmc.co.uk so they can get your practices added in.

LMC Support Network Home page

Practice Level View

LMC Level View

Registered Patients - Dec 2025	Number of Practices - Dec 2025	Partner Workload - Dec 2025	Total FTE Qualified GPs - Dec 2025	Total Appointments Delivered - Dec 2025	Total Online Consultations - Dec 2025
29,401,640	2,756	8,161	12,678,224	14,006,473	3,542,484

GP PARTNERS	SHARED GPs	TOTAL PERMANENT GPs (Partner + Shared)	
Headcount - Dec 2025: 18,344	FTE - Dec 2025: 15,148.7	Headcount - Dec 2025: 21,030	FTE - Dec 2025: 12,554.6
Headcount - Dec 2024: 18,344	FTE - Dec 2024: 15,148.7	Headcount - Dec 2024: 21,030	FTE - Dec 2024: 12,554.6

APPOINTMENTS (Data taken from the NHS England GPMS dataset)			
GP Appointments - Dec 2025: 13,888,905	Total Appointments (GP & Non-GP) - Dec 2025: 30,867,814	Total Non-GP Appointments - Dec 2025: 14,188,825	Appointments Within 15 mins - Dec 2025: 16,269,082
GP Appointments per 1,000 Patients - Dec 2025: 227	Total Appointments per 1,000 Patients - Dec 2025: 510	% of Appointments Same Day - Dec 2025: 44.7%	% of Appointments within 15 mins - Dec 2025: 54.1%



RECENT NEWS

WhatsApp Roundup - 10th February - 9th March 2026

Advice and Guidance Expansion

- Discussion of statements from NHS England regarding expansion of Advice and Guidance as part of outpatient transformation.
- NHS England confirmed plans for systems to implement Advice and Guidance pathways in the “top 10 specialties” during 2026–27.
- Concern was raised that this could represent a large expansion of workload, particularly if implemented without meaningful GP co-production.

Neighbourhood and System Reform

- Discussion referencing the DHSC 10-Year Plan impact statement, with concern that it understates potential risks to general practice.
- Members highlighted that new neighbourhood models and system reforms are already being piloted locally, and emphasised the need for LMCs to prepare for implementation pressures.

Secondary Care Prescribing Responsibilities

- Extensive discussion about hospital responsibility for prescribing medications initiated in secondary care.
- Some trusts were reported to be directing patients back to GPs for prescriptions rather than issuing FP10 prescriptions in clinics.
- Members noted that current contracts generally require hospitals to supply medication for immediate clinical need, but interpretation varies widely.
- The GIRFT recommendation of 28-day supply for secondary-care initiated medications was referenced, though this is not currently contractual.

Doncaster LMC Open Letter and Leadership Debate

- An open letter from Doncaster LMC to the GPCE Chair was shared, prompting extensive discussion.
- The letter raised concerns about GPCE leadership and direction, prompting debate about whether leadership change would help the profession.
- Views differed significantly:
 - Some argued changing leadership would not influence government policy, as the government appears determined to pursue its agenda regardless.
 - Others felt raising concerns about leadership is legitimate and necessary, particularly during a crisis for general practice.

Concerns Over CAIP Funding Changes

- Members discussed the proposed repurposing of around £292 million of CAIP funding from PCNs to individual practices, where it would be ring-fenced for additional GP sessions.
- Concerns were raised that this could reduce financial flexibility, risk funding for multidisciplinary PCN roles and services, and potentially lead to redundancies among PCN-employed staff.
- Some warned the change could destabilise PCNs, although others felt it may represent damage limitation if the funding might otherwise have been tied to stricter access targets or removed altogether.

PCN Workforce and Redundancy Risks

- Questions were raised about who would be responsible for redundancy costs if PCN staff become unaffordable due to funding changes.
- Possible options discussed included:
 - redundancy within PCNs
 - TUPE transfer to other providers
 - practices absorbing staff costs.



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WhatsApp Roundup - 10th February - 9th March 2026

iRefer Clinical Decision Support Tool

- Discussion about iRefer being introduced by some trusts to guide imaging requests.
- Several areas reported that the tool had been introduced without GP agreement, with limited opt-out.
- Experiences varied: some reported minimal workload impact, while others found it time-consuming and restrictive, requiring reframing of symptoms to obtain investigations.

Local Commissioning and Service Funding

- Members compared local payments for services, particularly Inclsiran injections, noting large variation between areas.
- Some practices reported refusing to provide services where payments do not cover costs.

GP Contract Referendum

- Multiple messages highlighted that the BMA GP Contract Imposition Referendum has opened, with voting closing on 25 March.
- Members were encouraged to vote and share information about the referendum, including webinars explaining the contract changes.
- The potential for professional action starting from 1 April 2026 was referenced depending on the referendum outcome.

Questions About Strategy After the Referendum

- Some participants questioned what practical impact a “No” vote would have, particularly whether it would lead to renewed negotiations with government.
- Concerns were raised about how to rebuild momentum and support among grassroots GPs, particularly after previous collective action efforts lost momentum.
- Suggestions for alternative strategies were raised, including more assertive approaches aligned with conference policy, such as potential coordinated resignations.

Safeguarding Work and Payment

- A substantial discussion focused on whether GPs should be paid for safeguarding-related work, such as preparing reports for local authorities.
- Issues raised included:
 - lack of consistent payment arrangements
 - very low fees offered by some councils
 - difficulties pursuing payment through legal routes such as small claims court.
- Some participants highlighted the systemic funding issue, arguing that safeguarding workload should be properly accounted for in core general practice funding formulas such as Carr-Hill.

Funding Structures and Local Authority Responsibilities

- Contributors discussed how responsibility for funding safeguarding work is often unclear between local authorities and health organisations, with costs effectively falling on practices.
- It was noted that the work often continues despite lack of payment due to professional and ethical responsibilities to patients.

ADHD Diagnosis and Shared Care

- Some areas are exploring enhanced services for ADHD diagnosis and medication titration in general practice, with specialist support and referral pathways.
- Proposals aim to reduce costs compared with Right to Choose providers.
- Concerns raised include:
 - whether ADHD diagnosis fits within core GP services
 - the need for appropriate training, supervision and funding
 - safety concerns around shared-care prescribing arrangements.



RECENT NEWS

Recent Website Uploads

09.02.2026

- [GPC updates](#)
- [Collaborative arrangements - North & South Essex LMCs](#)
- [Critical analysis of contract changes - West Pennine LMC](#)
- [Collaborative Arrangements for Safeguarding Children and Adults](#)

[See the LMCSN Website here.](#)



Recent Forum Posts

[Levy rates by LMC | Forum | LMC Support Network](#)

[See the LMCSN Forum here.](#)



LMCSN Steering Group

The LMCSN Steering Group plays a key role in guiding the work of the Support Network. You can see the Steering group members on the website:

[Meet the Team here](#)

