



Update from the Consortium of Lancashire & Cumbria LMCs

Tuesday 5th May 2026

Help Us Grow Our Audience

We understand that you are busy and are likely to receive many emails on a daily basis. However it is important for you to receive communications from us because **we can help and support you.**

We know there are many colleagues who do not receive our brieflet, so please help us by sharing this with your team and [letting us know](#) to add them to our distribution lists.

MGUS Service – Ongoing Delays and Escalating Concern (L&SC)

The LMC has been consistently pressing for the development of a commissioned MGUS service for over two years, raising concerns about workload, safety, and the inappropriate transfer of responsibility into general practice.

Since January, the LMC has continued to pursue the Medical Director at L&SC ICB for clarity on the commissioning of a redesigned MGUS service, following initial correspondence in January and subsequent system discussions which clearly supported the introduction of a centralised model to remove ongoing monitoring responsibility from general practice.

A full timeline of this engagement is set out for practices to review below.

Despite this early and unequivocal agreement, there has been no meaningful progress in delivery. Updates received in March suggested that a new service was close to implementation but would not be in place for April. We are now in May and, despite further escalation from the LMC, there remains no confirmed timeline for delivery.

The most recent response from the Medical Director cites internal pressures, including significant workforce reductions, but again offers only a vague assurance that he will provide a "positive update soon". This lack of clarity is deeply unsatisfactory.

The LMC is increasingly concerned that:

- Practices continue to carry responsibility for MGUS monitoring despite clear system agreement that this should transfer elsewhere
- There is a growing disconnect between strategic intent and operational delivery
- Practices are being left exposed with no clear end point to interim arrangements

This position is not sustainable. The LMC will continue to actively escalate this issue and seek urgent, definitive answers from the ICB, including clear timescales for implementation.

We will continue to apply pressure and will not let this issue drift.

Practices will be updated as soon as we receive firm and actionable information.





Update from the Consortium of Lancashire & Cumbria LMCs

Timeline of Communication - MGUS

January 2026

- **8 January** – Initial MGUS letter sent by LMC Chairs and Vice Chairs: [Letter re MGUS from LMC Chairs and Vice Chairs](#)
- **15 January** – MGUS Workshop held with LMC Chairs and Vice Chairs in attendance.
- **16 January** – Response from ICB Medical Director confirming:
 - Strong system-wide agreement for a redesigned MGUS service
 - Proposal for a centralised service taking full responsibility for monitoring, removing ongoing clinical oversight from primary care

March 2026

- **10 March** – Follow-up MGUS letter sent: [MGUS Letter](#)
- **11 March** – Medical Director response:
 - Confirmed discussions underway with his team to assess progress
- **25 March** – Update requested by LMC
- **25 March** – Medical Director advised:
 - Commissioning of the new service in progress
 - Service not ready for April, but “nearly there”

April–May 2026

- **30 April** – Further update requested via email highlighting lack of clarity as system moves into May
- **4 May** – Medical Director response:
 - Cited ICB restructuring and loss of 180 staff impacting progress
 - Confirmed work ongoing
 - Indicated a positive update would be given soon
 - No definitive timeline provided





Update from the Consortium of Lancashire & Cumbria LMCs

Medicines Optimisation Team (L&SC)

We wanted to take this opportunity to provide GP practices with a brief update regarding our ongoing efforts to engage with colleagues in the Medicines Optimisation (Meds Op) team.

Over recent months, we have been actively attempting to open dialogue with Meds Op colleagues to raise concerns that have been shared with us in relation to the Meds Op LES. We fully recognise that this has been an exceptionally challenging area, with many practices highlighting the impact of what are widely perceived as unrealistic targets.

We feel that despite repeated attempts to initiate discussions, we have unfortunately experienced limited engagement from the Meds Op team. Communication has been difficult to establish, and they have not been consistently involved in conversations where we have sought clarification or raised concerns on behalf of practices.

However, today we have received communication from the Meds Op team confirming that our concerns are now being actively reviewed. We have been advised that they will provide a response as quickly as possible, and we will share further updates as soon as we receive them.

We appreciate how frustrating this situation is for practices, especially given the operational pressures already being faced. Please be assured that we are continuing to pursue this matter and are making ongoing efforts to obtain clarity, advocate for more realistic expectations, and push for changes that will better support practices.

We also want to thank you for your continued patience and for sharing your feedback with us. It remains vital in shaping these discussions.

School Based Vaccination Service data (Intrahealth - L&SC)

Last year, the LMC was made aware that practices in L&SC had received documents from Intrahealth (the school based vaccination service provider) containing vaccination data covering the period of Sept 2022–Jan 2025. Although initially sent as PDF files, from 1 Oct 2025 the intention was for CHIS to instead share the data in CSV format for batch uploading. However, we were alerted to data quality issues with the information some practices were receiving and also that using there may be issues using EMIS Batch Data Manager. Given the workload and patient safety concerns brought to our attention, we have been following this up with ICB Quality Team and NHSE colleagues over the past few months and want to be assured that the proposed solution to this issue does not burden practices with unacceptable risk. With this in mind, we want to seek further insight from practices who may not already have been in touch with us about this.

Please can you take a minute to complete [this survey](#) to help us quantify the scale of the issue across L&SC.

Additionally, we would advise any practice in L&SC that believes they are impacted by this incident to include it on their risk register as appropriate. Practices can note that their LMC has escalated the issue with ICB and NHSE locally within their mitigations and we will continue to update you when we have more information.





Update from the Consortium of Lancashire & Cumbria LMCs

LSCFT IRS Update –

Update to NG12 Guidance: Gynaecological Cancers

NICE has issued an update to the NG12 guideline relating to gynaecological cancers, with changes specific to ovarian and endometrial cancer.

In April 2026, recommendations were reviewed and updated, including:

- Recommendations 1.5.6 to 1.5.9 and 1.5.11 (ovarian cancer), covering age criteria and serum CA125 thresholds
- Recommendations 1.5.12, 1.5.14 and 1.5.15 (endometrial cancer)

Please review the updated guidance in [full here](#).

LMC HR: Employment Law Updates

The landscape for UK employment law is undergoing a significant shift following the passage of the Employment Rights Act 2025. Most major changes are being phased in between April 2026 and January 2027. Check out the immediate and upcoming changes via the following link - [Employment Law Updates | Consortium of Lancashire & Cumbria LMCs](#)

LMC HR: Template HR Policies and Procedures Handbook

Check out our new template HR Policy and Procedures Handbook available to download via the following link - [HR Policies and Contract Templates | Consortium of Lancashire & Cumbria LMCs](#)

If you need login details to access the above link and or if you wish to discuss any of the details, please contact the free LMC HR Service hr@nwlmc.org

LMC Vacancies

Three of our five Committees currently have seats available for GP representation:

- Lancashire Coastal LMC: vacancies available
- Central Lancashire LMC: 2 vacancies available (1 for Greater Preston & 1 for Chorley & South Ribble)
- Lancashire Pennine LMC: 1 vacancy available (Rossendale)

We are keen to hear from GPs, including Sessional's, GP Registrars/ Trainees, who may wish to get involved to represent your constituents. Please let us know if you are interested in being a LMC member or would [like to find out more](#). [You can find your LMC representatives on our website here](#).





Update from the Consortium of Lancashire & Cumbria LMCs

Let's talk pancreatic cancer - free webinar for primary care professionals in Lancashire and South Cumbria

In partnership with [GatewayC](#), the cancer alliance are hosting a free webinar and Q&A session with pancreatic cancer experts Mr Daren Subar, Consultant General and Hepatopancreatico-biliary Surgeon, and Vicki Stevenson-Hornby, Pancreas and Hepatobiliary Specialist Nurse, alongside GatewayC GP Lead, Dr Sarah Taylor.

This free learning session is one of four webinars in a series with GatewayC – the leading earlier cancer diagnosis resource. Each session will be hosted by experienced GPs and feature secondary care specialists who will discuss prostate, lung, pancreatic, and liver cancer.

[Explore the full series.](#)

Live pancreatic cancer webinar on **Tuesday 19 May 2026, 12:30 – 13:15**, will provide guidance on:

- Symptoms that should trigger urgent investigation
- Managing new-onset painless jaundice
- The role and limitations of primary care investigations
- The importance of safety-netting

This webinar is designed for primary care professionals in Lancashire and South Cumbria. Live Q&A available.

Can't make it? Register to watch on demand after the event has finished.

[Secure your FREE place now](#)

LMC OCCUPATIONAL HEALTH SERVICE

The LMC offers an Occupational Health Service designed to support General Practice and their employees.

WHAT WE OFFER

- Absence Medicals/ Absence Management Referrals – £300
- Ill Health Retirement Reports – approx. £600-£700*
*(subject to case review)

WHY CHOOSE US

Services delivered by experienced GPs with occupational health expertise.

- Confidential
- Quick turn around
- No referral threshold
- Accessible & Local

SERVICE LOCATIONS

- Castle Medical Group, Clitheroe
- Garstang Medical Practice, Preston
- Site visits for bulk requests can be arranged.
- Video consultations will also be considered.

CONTACT

- mariah.desylva@nwlmc.org
- nwlmc.org/support/lmc-occupational-health-service

