Update from the Consortium of Lancashire & Cumbria LMCs

Tuesday 8th September 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.

Medical Evidence for School Absence

As pupils return to school, we would like to remind practices of the joint guidance previously issued by the LMC alongside Lancashire County Council, Blackburn with Darwen Council and Blackpool Council regarding requests for medical evidence to support school absence due to illness.

Schools are not expected to routinely request medical evidence from parents to support illness-related absences. In most cases, a parent's notification that their child is too unwell to attend should be sufficient.

Importantly, GPs do not provide fit notes for children to excuse absence from school and cannot provide retrospective certification. Avoiding unnecessary requests for medical evidence helps prevent GP appointments being used where there is no clinical need for the child to be seen.

Practices may wish to refer to the attached joint letters if they receive inappropriate requests for school absence certification.

Please see the relevant joint letter for your local authority area attached.

- **Lancashire County Council and LMC joint letter**
- **Blackburn with Darwen Borough Council and LMC joint letter**
- **Blackpool Council and LMC joint letter**

For other other template letters to help practices manage inappropriate workload, please see our website - Workload Management & Safe Working in General Practice | Lancashire & Cumbria LMCs | Consortium of Lancashire & Cumbria LMCs

MARRAC GP notification process reinstated (LSC Only)

Following the temporary suspension of the MARRAC GP notification process, the ICB has confirmed that it will once again identify and contact relevant GP practices where primary care information may contribute to MARRAC discussions. This is an interim arrangement while a permanent, information governance compliant process is developed.

Please contact Mikaela if you have any questions.

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LSC ICB - SMS Allocations

The ICB has issued updated guidance on the use of SMS messaging in general practice for 2026/27, encouraging use of the NHS App. This has been sent alongside practice SMS allocations and access to a new usage dashboard via Aristotle to support you to monitor practice level SMS usage. Most practices should have received this information last week, with some communications following this week.

The LMC continues to engage with the ICB regarding concerns about practices exceeding their SMS allocations and the potential impact on service delivery where essential patient communications are required. Practices experiencing difficulties in remaining within their allocation are encouraged to raise these concerns with their local ICB primary care team and keep the LMC informed of any emerging issues.

As always, do not hesitate to contact us if you have any queries.

GP collective action and escalation plan

GP collective action continues this September. Following steady monthly additions, the BMA GPC have decided to maintain all existing actions this month rather than escalating further.

This decision creates the opportunity for the newly elected GPC England officer team to build on positive initial discussions with Amanda Doyle, National Director for Primary Care and Community Services (NHSE). Their priority is to secure written confirmation from the Government agreeing to formal bilateral negotiations prior to our next committee meeting on 17 September. In preparation, the GPCE committee will still discuss a comprehensive escalation plan on 17 September, should Government fail to deliver sufficient reassurances.

Practices can continue to support the campaign by helping patients understand the pressures facing general practice, why change is needed and how they can support their local practice. By now, practices should have received a package of posters as part of our August collective action. There are also leaflets in different languages that you can order from the BMA website, as well as short films to display on your reception screens, and graphics add to your practice website, available to download here.

The BA GPC also encourage practices to support the public campaign by signing and sharing the public petition with patients.

Finally, practices are encouraged to **write to your MP using** the BMA online tool and explain directly the pressures your practice is facing.

Read more about the other collective actions from the GP campaign webpage

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GP pressures

In July 2026 the NHS employed the equivalent of 29,057 fully qualified full-time GPs – a slight increase from the previous month (29,008). Despite the GP workforce growing, there are still 307 fewer fully qualified FTE GPs than in September 2015.

During this time, there has been a rise in the number of patients. GPs employed by practices are now responsible for about 12% more patients than in 2015, demonstrating significant workload pressures. There is also an increase in appointments, with 34 million standard appointments delivered in July 2026 – an average of 1.48 million appointments per working day.

Read more about the pressures facing general practice.

Report into use of Advice and Guidance (A&G) referrals

HSSIB's report on the use of A&G referral services in England found evidence that patients were harmed when hospital referrals were pushed back instead of accepted.

Since the imposition of the 2026 contract that further embedded the use of A&G in General Practice, GPCE have repeatedly raised issues with its implementation, and this report vindicates those concerns, showing that patients have come to harm as a result of a rushed-out and inconsistently applied process.

GPCE continue to argue for an urgent review of a system that is putting patients at risk.

NHS Community Pharmacy Hypertension Case-Finding Service – referrals from practices

Changes to the service are being made from 3rd September 2026, with amended patient eligibility criteria that focus principally on hypertension case-finding. The key changes affecting general practice are:

- Only patients without a prior diagnosis of hypertension and who have not had their blood pressure checked in the last 5 years can be referred/signposted by general practice for a clinic BP check.
- Ambulatory blood pressure monitoring (ABPM) can only be offered to adults who are aged 40 years and over. Practices can still refer patients with a pre-existing diagnosis of hypertension for ABPM.

Further information can be found in a Community Pharmacy England briefing document for practices.

LMC Vacancies - Help shape the future of General Practice

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

- Lancashire Coastal LMC: several vacancies available
- Central Lancashire LMC: 1 vacancy available (Chorley & South Ribble)
- Lancashire Pennine LMC: 1 vacancy available (Rossendale)

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.