

Update from the Consortium of Lancashire & Cumbria LMCs

Wednesday 9th July 2025

General Practice Alert State (GPAS)

You can see the latest SitRep results on our website.

Submitting your data is crucial. When we don't receive your data, it limits our ability to present a strong, accurate picture to system partners. This, in turn, weakens our case when we advocate for more resources and support for your practice. Your input makes a difference — thank you for taking the time to help us fight for you.

<u>Please let us know</u> if you are a Practice Manager and do not receive the GPAS input emails. If someone at your practice needs to be added to the distribution list please email <u>enquiries@nwlmcs.org</u>. Submission links are sent out every Tuesday and Wednesday.

LES Sign Up and Assurances - L&SC Only

We understand that the ICB have recently been in touch with practices requesting an update on current LES sign up and have asked further questions around intention to subcontract. Whilst there is merit to practices subcontracting their services (e.g. oversight for patients, control of those arrangements) we have concerns around potential risk that may be transferred if these arrangements are not given oversight by the ICB.

It is a contractual requirement under the NHS Standard General Medical Services (GMS), Personal Medical Services (PMS) and Alternative Provider Medical Services (APMS) Regulations that practices must seek prior approval from the ICB for any subcontracting arrangements.

The ICB, as the commissioner, is responsible for assuring itself that any subcontracting does not:

- Affect the quality or safety of service delivery.
- Compromise patient confidentiality.
- Breach NHS contractual or statutory requirements.

This is reinforced in <u>NHS England's guidance</u>, <u>"Subcontracting arrangements: guidance for commissioners and practices"</u>, which makes clear that while the subcontracting agreement is between the practice and the third party, the ICB must be assured that the subcontracting arrangement is appropriate.

Responsibility for oversight and assurance of subcontracting arrangements should not rest solely with individual practices — the ICB must undertake its own due diligence to ensure all statutory and contractual obligations are met.

We would encourage practices to consider all options for LES arrangements, including subcontracting and also the option to not take on a LES at all. Whilst the menu of LES represents greatly improved investment in General Practice, LES are not compulsory, and it is the ICBs responsibility to commission an appropriate service for your patients if you are unable to provide or subcontract a service.





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NHS England 10-Year Plan: Implications for General Practice

NHS England has published its long-awaited 10-Year Plan, outlining its ambition for the future of the NHS, with a strong emphasis on shifting care into the community and embracing innovation. While the stated aims offer potential opportunities, the plan raises significant concerns for general practice, particularly around delivery, sustainability, and the erosion of traditional models of care.

Key Highlights and LMC Concerns:

- Community-Focused Care Lacking Clarity on Delivery and Funding:
 The plan restates a commitment to shift resources into community settings. However, it provides little clarity on how this will be funded or operationalised, especially given the current pressures on primary care. Without dedicated, ring-fenced investment and implementation detail, this ambition risks remaining aspirational.
- The Rise of 'Super Practices':
 A vision of fewer, much larger practices—potentially with list sizes in the hundreds of thousands—is deeply concerning. This model risks dismantling the fundamental principles of continuity and personalised, cradle-to-grave family medicine that patients value and general practice was built upon.
- Vertical Integration with Acute/Foundation Trusts:
 Proposals for greater vertical integration threaten to subsume the small business model of general practice within large hospital trusts. This could fundamentally alter the identity, autonomy, and clinical leadership of general practice.
- Horizontal Integration via Federations or GP-at-Scale Providers:
 Funding and contracts increasingly favour GP Federations and other large-scale providers.
 While integration does have its benefits, this approach may marginalise individual practices and shift influence and funding away from those delivering day-to-day patient care.
- Neighbourhood Health Centres Lacking Upfront Investment:
 The plan introduces the idea of Neighbourhood Health Centres but fails to provide any assurance of the upfront investment required. Without proper capital and workforce planning, these centres risk placing further strain on already stretched services.
- Al and a Single Shared Care Record Data Governance Concerns:
 While the ambition for a unified patient record is understandable, the plan's promotion of Aldriven solutions lacks sufficient detail on data governance, patient consent, and clinical accountability. These are fundamental issues that must not be glossed over in the drive toward digital integration.

What's Next:

The General Practitioners Committee (GPC) is scheduled to meet with Stephen Kinnock MP next week to raise these concerns directly and seek clarity on how the plan will safeguard the future of independent general practice. The LMC will continue to monitor developments closely and will keep practices updated on any outcomes and further advocacy efforts.





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Advice & Guidance LES - L&SC Only

Last week practices received a letter from L&SC ICB regarding the decision to cease commissioning the local A&G scheme and move to the national specification. The LMC were disappointed to note that this decision has been made despite us raising misgivings about the capped funding allocation and potential to exceed this. We had understood that there may have still been a potential to reinvest the local funding to use as a buffer for practices exceeding the national allocation.

We will be engaging with the ICB to discuss this matter further and will ensure that the local funding is reinvested in general practice in whatever guise that may look like. We will update practices as soon as more information becomes available.

Autism pathway for school aged children - Central and West Lancashire

The LMC are well aware of the challenges that practices in Central and West Lancashire are facing in light of the recent decision for LSCFT to cease accepting referrals to their autism pathway and the impact this has had on services delivered by Mersey and West Lancs Trust. We have been in touch with both providers and the ICB on this issue. Patients and their families are relying heavily on GP practices that have been placed in a challenging position and the need for clarity is urgent. It is our understanding that the ICB will imminently be communicating with practices to provide an update and that arrangements will be put in place soon for this patient group soon. In the meantime, please contact jessica.tomlinson@nwlmcs.org if you need to.

A Quick Guide for GP Practices: Phlebotomy - L&SC Only

The LMC has created a <u>guide</u> to provide supportive, clear guidance to practices in Lancashire & South Cumbria on the Phlebotomy LES 2025–2026.

General Practice Infographics

We have created infographics for Practices to use in your waiting rooms, websites and social media. These infographics raise patient awareness on the current state of General Practice and how practices are operating.

Feel free to pick and choose the images that are suitable for your practices needs <u>on our website</u>. If you would like the images in a different format <u>please get in touch</u>.

Invitation to participate in funded Learning Event Analysis (LEA) for Prostate Cancer

Lancashire and South Cumbria Cancer Alliance Early Diagnosis Team would like to invite Practices to take part in a funded Learning Event Analysis focused on Prostate Cancer. Please see more information here.

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.

