



## Update from the Consortium of Lancashire & Cumbria LMCs

Wednesday 16<sup>th</sup> 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.

[Please let us know](#) 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 [enquiries@nwlmc.org](mailto:enquiries@nwlmc.org). Submission links are sent out every Tuesday and Wednesday.

### Urgent: Grave threat to the future of General Practice

Please see [attached letter](#) from Dr Adam Janjua, LMC Chief Executive Officer, which was circulated to Practices yesterday.

### Requests for medical evidence to support pupil's authorised absence due to illness

The LMC and Lancashire County Council recently reviewed guidance to Headteachers in relation to the above and [this letter](#) was circulated to local schools across the local education authority area.

Department for Education guidance to schools explains clearly that they are not expected to routinely request that parents provide medical evidence to support illness absences and that where it is deemed necessary, there is no strict criteria for what can be accepted. Schools are also advised to be mindful that requesting additional medical evidence can place unnecessarily places pressure on GP practices, particularly if the illness has not required treatment by a health professional. Practices are reminded of the guidance and the [letter](#) on [our website](#) that may support dialogue with patients who feel practice input may be required.

### Referral of NHS England to the ICO

[Following revelations](#) that data collected for COVID-19 purposes has been used in the training of an AI model under the authority of NHSE, the BMA and RCGP via the Joint GP IT Committee urgently spoke with key stakeholders involved in the programme to ascertain the facts. Following this engagement and out of an abundance of caution, the GPC wrote to the ICO (Information Commissioners Office) to raise the facts of the case with them and to enable an appropriate response to be given by them in their capacity as regulator. We will provide an update as and when we know more.

### GP Premises Survey 2025

The BMA are calling on all practice managers and premises-owning partners across England to take part in a GP Premises Survey 2025, to help gather essential data on the condition of GP buildings. This evidence will directly shape proposals and negotiations with Government – supporting their case for the urgent investment and backing your practice needs.

Help advocate for better premises and stronger support for general practice - [take the survey](#)





## Update from the Consortium of Lancashire & Cumbria LMCs

### NHS England 10-Year Plan

The BMA has produced an initial [summary of the 10 year plan](#) with some further details from Dr Katie Bramall, BMA GPCE Chair as follows:

*You may have read the headlines and have more questions than answers. In particular “Where is the commitment to a new GP practice contract within this parliament?” as promised in writing earlier this Spring by Mr Streeting himself. That, and many more questions besides, will be put to Stephen Kinnock MP this week, as the Minister for Care (primary, community and social care) comes to GPC England with other senior Government counter parts. The plan is full of big ideas, but light on delivery, detail, and funding. I would encourage the profession to engage with what is prioritised for delivery within the next three years - anything else is largely aspirational.*

*I have been told by Ministers, that the 10 Year Health Plan is not a list of instructions, and neither are its contents set in stone, but that it is “the beginning of an iterative process”. That’s just as well given the lack of input from those of us tasked with delivering it. You can be assured that GPC England will be feeding back at every opportunity in the weeks and months ahead.*

*There is an ongoing focus on at-scale working, digitisation of services, and use of nascent technologies. An inconvenient truth perhaps, is the lack of evidence base. Where there is strong evidence, is in the small practice model - for continuity of care, patient trust, health outcomes, and financial value. GPs have delivered a ‘Neighbourhood NHS’ since 1948. We cannot risk diminishing the value of cradle-to-grave, personalised, family care; neither can we support being subsumed into a monolithic, anonymous hospital trust which will only serve to accrue greater financial deficit.*

*The success or failure of this ambitious and highly political paper will rest on GPs feeling safe and secure enough in their practices to have capacity to seize opportunities ahead.*

*What the 10 Year Health Plan says on priority issues in General Practice:*

- *Reaffirming the commitment to bring back the family doctor and end the ‘8am scramble’ for appointments*
- *Broad aim to train thousands more GPs and to shift the emphasis of overall NHS recruitment into primary care.*
- *The traditional partnership model will be retained where it is working well - but also seeks to set alternative ‘neighbourhood health’ models, delivering at-scale services over larger areas.*
- *Reform of the Carr-Hill alongside wider shifts in funding, to areas with disproportionate economic and health challenges.*
- *With the intent to free up GP capacity, the recommendations of the ‘Red Tape Challenge’ will be implemented, and technology like ambient ‘AI Scribe’ voice technology will be deployed.*

Read more about the 10 year plan [here](#)

Watch this video where Dr Katie Bramall goes into more detail: [GP Contract Updates | British Medical Association](#)





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### Join the BMA Register

Ahead of expected changes to the Medical Act later this year, the BMA is now calling on all doctors to add their name to the new BMA register.

In a recent survey, only 16.2% of BMA members were found to have confidence in the GMC's ability to protect the public, while only 10.8% believe they can regulate in a way that distinguishes doctors from medically unqualified providers. Now is time to send a message that change must be made.

By signing the BMA register, any GP will be adding their voice to the thousands of others who have already signed up in support of a new professional regulator. One that

- Puts the medical profession at the heart of its decision making
- Protects patients by making clear who is and who is not a doctor
- Treats doctors fairly throughout fitness to practise processes
- Ensures doctors – and their patients – benefit from high-quality medical education and training

Find more information – and crucially add your name – by visiting [www.bma.org.uk/BMAregister](http://www.bma.org.uk/BMAregister)

### BMA Sessional GP Conference 2025

The BMA's conference for sessional GPs will take place on Friday 19 September 2025 at BMA House, London and online. This conference is free of charge to attend for BMA members, and it will include a mix of plenary presentations, discussion sessions and breakout groups to give practical tips on key issues for sessional GPs. Register your interest at [confunit@bma.org.uk](mailto:confunit@bma.org.uk) for priority notification when registration opens.

### CumbriaMed Research Webinar Series - Cumbria Only

The CumbriaMed Research Webinar Series showcases leading health researchers working in and with Cumbria. Each session features two expert speakers, followed by a Q&A. Open to staff, patients, relatives, and the public, the series explores how local research is shaping the future of care.

[Please see attached flyer for details of the next webinar on Cardiology.](#)

### 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.

