



## Update from the Consortium of Lancashire & Cumbria LMCs

Tuesday 31<sup>st</sup> March 2026

### **FIT in Primary Care - LMC position (L&SC)**

The LMCs and ICB in Lancashire and South Cumbria have recently issued communications regarding the use of Faecal Immunochemical Tests (FIT) in primary care. As you will be aware, ICB pathology commissioners, working in conjunction with the Cancer Alliance and system-wide stakeholders, has taken the decision to move to a single FIT as the standard approach, whereas previously practices in our locality routinely requested two tests.

We recognise that this represents a change to established local practice. The LMC Consortium has discussed the matter in detail with both ICB and Cancer Alliance colleagues, and internally through committee structures, to ensure that the views of grassroots GPs have been heard and represented. We are grateful to colleagues who have shared feedback and clinical perspectives, which have reflected a range of views.

It is understood that the commissioner's decision has been informed in part by financial and pathway considerations, alongside reference to national guidance and practice in other areas. Cancer Alliance facilitated cross-system clinical discussions to inform ICB pathology commissioners' decisions. While our locality has been distinct in adopting a two-FIT approach, we recognise that opinion within our GP membership varies regarding the clinical value of continuing this as standard.

As a representative body, our primary role is to support GPs in delivering safe, effective, and patient-centred care.

We wish to make clear that individual GPs should continue to exercise their own professional clinical judgement when determining whether one or two FITs are appropriate for a particular patient. Clinical discretion remains paramount, particularly where symptoms persist, results are borderline, or where there are other factors that warrant further investigation. The LMC Consortium Executive Board maintains that no GP should be criticised for acting in the best interests of their patients where their clinical reasoning supports requesting a second FIT. Equally, colleagues who are content to follow the single-FIT pathway should feel supported in doing so.

[We welcome ongoing feedback](#) from practices so that we can continue to share this constructively with the ICB and Cancer Alliance as needed.

*Signed, Chairs*

### **Lancashire Coastal LMC Vacancies**

Lancashire Coastal LMC currently has 2 seats available for GP representation.

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](#).





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### Sexual Safety Charter – Sign-Up Deadline Reminder (Today)

Practices are reminded that the deadline for signing up to the NHS Sexual Safety Charter and completing the self-assessment checklist is today.

At this stage, practices are only expected to:

- Sign up to the Charter, and
- Engage with / complete the self-assessment checklist

There is no expectation for practices to have fully developed or implemented new policies, training programmes, or processes by today's deadline.

Further primary care specific guidance, templates, and resources are expected shortly from NHS England, with additional support from the ICB to follow.

Please contact [Mikaela](#) if you have any queries or concerns.

### Working Together to Safeguard Children 2026

[Working Together to Safeguard Children](#) 2026 has now been published, replacing the 2023 version.

This statutory guidance sets out how organisations and professionals should work together to safeguard and promote the welfare of children. While the core principles remain consistent, practices should be aware that local safeguarding partnerships may update processes and pathways in response to the new guidance.

What this means for practices:

- Review and update your safeguarding children policies to reflect the 2026 guidance
- Ensure any local pathways, terminology, and contact details remain accurate
- Check that staff are aware of any changes relevant to their role
- Be aware of a potential increased focus on early help, which may result in more requests for GP input at earlier stages. Where this extends beyond straightforward factual information sharing, practices may wish to consider the LMC's [existing guidance on safeguarding workload and funding](#).
- Greater clarity that information sharing without consent is appropriate where there is risk of harm
- Clearer definitions of roles and responsibilities across safeguarding partners, which may help practices challenge inappropriate requests

We recommend practices take a proactive approach to reviewing their documentation to ensure alignment with the latest national guidance. Should you require further support, please contact our [LMCs Safeguarding Lead](#).





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### 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](#)

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](mailto:hr@nwlmc.org)

### Participation in Professional Fees Committee survey on DWP proposal

The professional fees committee are writing to request your [participation in a survey regarding the recent proposal from the DWP](#) (Department for Work and Pensions) to increase the GPFR (general practice factual report) rates.

The DWP has suggested raising the fee for each completed GPFR from £33.50 to £53.50, representing a 60% increase from the current rate, following the professional fees committee's request for a higher payment. While this is a substantial improvement, the offer is subject to several conditions, including the need to encourage timely responses, promote high-quality reporting, facilitate training sessions, and support ongoing digitisation initiatives. The DWP would want to review progress against each of these principles 1 year after the increase has landed and if they have not been met, the Department would reserve the right to return to the current fee (£33.50).

Your input is vital in helping the professional fees committee decide how best to respond to the DWP's proposal and to ensure your interests are represented in future discussions. Please complete the [brief survey](#) and share your perspective; this [survey](#) will be open for 3 weeks.

### Neighbourhood health services

DHSC and NHS England have published new documents setting out how the neighbourhood health services proposed in the 10 Year Health Plan are expected to work in practice:

- DHSC: [Neighbourhood health framework](#)
- NHS England: [Fit for the future - towards population health delivery models](#)

These documents, originally expected to be released in November 2025, provide important insight into DHSC and NHS England's plans. GPC England is currently working with the BMA's policy teams to analyse both documents and to produce materials for members.

They highlight certain targets and areas of focus, with GP access and urgent on the day (90% target) being one example. They also touch more widely upon the government's 'reform agenda', which include the use of technology, 'proactive' population health based approaches and out of hours care, encompassing urgent and emergency services.





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### NHSPS asset transfer

ICBs have written to NHS Trusts inviting them to take over leases currently held by NHS Property Services, including a significant number of GP surgery buildings. DHSC's guidance published at the end of January set out a timeline for Expressions of Interest (EOIs) to be submitted to NHSPS by the end of March. Equally worrying is the absence of consultation with the practices affected, and the fact that practices themselves have not been invited to submit EOIs. GPC are writing to Government to challenge this approach and to seek urgent clarity on what these changes mean for impacted practices- particularly given the ongoing crisis caused by disputed service charge debt.

### MP meetings

GPC England has recently met with a number of MPs including Sarah Green MP where she was briefed on estates and wider GP pressures and Health Select Committee member, Joe Robertson MP where GPC discussed concerns around the GP contract.

GPC also met with Liberal Democrat Primary Care Spokesperson Helen Maguire MP to discuss the future of general practice funding in particular the Carr-Hill formula and Shadow Health Minister, Dr Luke Evans MP. Following GPCs meeting Dr Evans raised an [urgent question in parliament](#) regarding the GP contract where he highlighted particular concerns around patient safety linked to the definition of an 'urgent' appointment and concerns echoes by GPCE regarding advice and referral.

In addition, GPC have met with The Rt Hon Pat McFadden MP, Secretary of State for Work and Pensions, to discuss fit notes. During the meeting they outlined the importance of the doctor patient relationship when dealing with fit note requests, the role of occupation health and what support patients may need during periods of ill health.

### Rebuild General Practice is powered by real stories from the frontline

[Rebuild General Practice](#) is looking to hear from as many GPs as possible about what's really happening on the ground and to work with you to bring those experiences into the public conversation. If you've seen or experienced something that shows the pressures, challenges, or impact on patients and staff, they want to hear from you! Please reach out to [hello@rebuildgp.co.uk](mailto:hello@rebuildgp.co.uk) to schedule a conversation and pitch those stories (confidentially or non) to media.

### Academy Matters - ML IT Training Newsletter - March 2026 (L&SC only)

[See the monthly IT Training newsletter here.](#)





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### Talk Cancer (Cancer Research UK) (L&SC)

Talk Cancer is for anyone in a position to promote health and wellbeing. If you're having conversations with people and are able to share health messages, this workshop is for you. Lancashire and South Cumbria Cancer Alliance have funded this workshop and it is free for delegates currently employed in Lancashire and South Cumbria.

We encourage attendance from:

- Any health and social care professionals
- People who work or volunteer in voluntary, Community, Faith, and Social Enterprise organisations (VCSFE)
- People who would like to become a cancer awareness champion for their organisation

Talking about cancer can save lives. It can break down barriers to seeking help and encourage people to take positive action for their health. Talk Cancer, Cancer Research UK's cancer awareness training programme, will give you the skills and knowledge to confidently talk about cancer and health with people in your community.

Register here:

- [Wednesday 15 April \(10am-12pm\)](#)
- [Wednesday 6 May \(2pm-4pm\)](#)
- [Thursday 11 June \(12noon-2pm\)](#)
- [Tuesday 15 September \(2pm-4pm\)](#)

### Invitation to early diagnoses of prostate cancer workshop (L&SC)

Following on from the recently completed Learning Event Analysis (LEA) on Prostate Cancer the cancer alliance are delighted to invite you to take part in this initial workshop. This will focus on agreeing and prioritising how to build and develop the recommendations from the LEA to improve early cancer diagnosis of Prostate Cancer across Lancashire and South Cumbria in 2026/27.

#### Workshop Details

- **Date:** 5<sup>th</sup> May 2026
- **Timings:** Arrival from 09.00am for a 09.30am start. The workshop will finish at 3.00pm
- **Venue:** Barton Manor Hotel, 746-768 Garstang Rd, Barton, Preston PR3 5AA
- **Refreshments & Lunch:** Will be provided please can you inform us of any special dietary requirements in your reply.

Your insights and expertise are vital, and your participation would be greatly valued. This is an opportunity to help shape the future of early diagnosis for Prostate Cancer in our region.

Should you have any questions or need further information feel free to contact [Ryan Moore](#), Senior Project Manager, Early Diagnosis.

Please RSVP prior to the COP 31<sup>st</sup> March 2026 to [Ryan.Moore7@nhs.net](mailto:Ryan.Moore7@nhs.net).

