Cambs LMC Newsletter

November 2025

Clause and Effect: Contract Compliance at Any Cost?

As we approach the end of the year, we know we are nearing the point at which "taking steps to" meet the access requirements as specified in the contract arguably re-defines as "fully provide".

It's when your plans should be completed, and your capacity to meet the demand from that day forward should be fully in place. But for those of us familiar with NHS contracting and the challenges of delivering public services with finite human resources, we know that consistent, full compliance is unrealistic.

We see and hear the immense effort you're putting into adjusting staffing, systems, and subcontracting arrangements.

We're also grateful to those of you raising concerns about the sustainability and safety of these changes.

Your attendance at our recent open meeting gave us insight into the areas that continue to cause concern.

Your feedback is invaluable.

At last week's LMC committee meeting, your representatives discussed managing pressure, particularly when demand consistently outstrips capacity.

We also talked about what happens when you inevitably encounter situations where full compliance with the three access modes (across the full hours of the day) just isn't feasible.

Cambs LMC Website: GP Contract Changes 25/26

Cambridgeshire Local Medical Committee Limited.
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Managing Patient Access and Service Flexibility

A key expectation of the contract is managing patients into appropriate appointments or services. This can mean directing patients to alternative services outside the practice, provided each case is assessed on an individual basis, rather than applying a blanket approach. Even when your service is "full," triaging individual requests remains a clear priority.

Building and updating your directory of suitable alternatives will likely be something you are either already working on or need to prioritise. If you cannot offer the appointment needed that day, for example, directing the patient to alternative care is still permitted.

Another challenge for practices under pressure is the decision whether to turn off free-text methods of online access. Whether the routine checkbox option for online requests fulfils the contractual requirement is still up for debate, and we're waiting on clarification from NHS England through our local ICB team. We're aware that some practices have already made this decision to manage staffing or demand pressures, and we've encouraged you to communicate this to the ICB if needed.

E-Declaration of Contractual Compliance

It's not just the new contract clauses under scrutiny right now. The annual e-declaration of wider contractual compliance is due by **21 November**, and as usual, the submission form is getting longer.

As we've advised in previous years, it's crucial that your answers accurately reflect the situation in your practice. If there are any gaps, it's best to highlight them early with the ICB, so you can explain that you're working towards full compliance and have an action plan in place.

If you have any questions about this process, don't hesitate to get in touch with us.

Weekly Pressure Checks and Ongoing Feedback

To help monitor the strain on practices, we've reinstated GPAS, our local system for tracking your operational pressure on a weekly basis. It provides a vital, real-time picture of the pressures facing practices across our area and it's the only consistent way to evidence workload and capacity at a system level, and to make sure that general practice pressures are seen, heard, and acted upon alongside those from hospitals and community services.

This will help us back up our discussions with the ICB with timely, real-time data from our members, ensuring we're all better prepared when periods of pressure require escalation.

Please see our dedicated GPAS page on our website to help you gauge your status and submit to us each week.

National Advocacy and Ongoing Support

We take some comfort in knowing that the challenges we face are not unique to our area. A delegation from our LMC committee attended the Conference of England LMCs on 7 November in Manchester, where LMCs from across the country proposed and debated motions on key priorities for the profession. The Cambs GPs in attendance expertly proposed motions on the inadequacies of General Practice premises and the need for sustainable funding for expansion and improvements. We also proposed a motion ensuring the DDRB uplift for salaried GPs is properly funded and passed on as reflected in employment contracts and as it is in Wales and Northern Ireland. Both motions were passed and will help shape policy moving forward.

Our representatives also debated motions proposed by other LMCs and participated in the Q&A session with the GPC Executive. The recent contract changes and the reaction of the profession to how they have been implemented, without the promised safeguards, was a strong and consistent theme of the conference. The profession remains in dispute with the government and NHS England over the lack of safeguards for online access, and in relation to the risks to General Practice contracts posed by the new neighbourhood contracts introduced in the 10 Year Health Plan published in the summer. We will continue to bring you updates from Katie in her GPC Chair role alongside the local implications for Cambridgeshire and Peterborough practices.

Navigating Contractual Pressures: We're Here to Help

Effective contractual relationships fundamentally rely on trust and a clear understanding of what is genuinely deliverable by both sides, and we recognise the immense difficulty involved in managing the pressure of constant contractual scrutiny when it is compounded by the heavy demands of day-to-day practice. Your LMC team is available to provide support, helping you navigate required discussions with the ICB and to work through the specific implications for your staff and your practice.

Although the future evolution of the contract's terms are yet to be determined, practices are currently expected to work towards compliance with the new clauses. Throughout this process, the safety of patients and the well-being of the teams must remain the foremost consideration. While the national commissioners' attention is heavily focused on compliance, the LMC remains committed to supporting practices in keeping safety and sustainability at the centre of their approach.

Pastoral Support

At last week's committee meeting, your representatives spent time discussing the current very significant pressures on GPs and their teams across the county. Any of us working in general practice at the moment cannot fail to be aware of how difficult it can be to manage the intense levels of demand, the challenges of working within a strained and struggling NHS, and the personal impact of still trying to do the best that can be done for each individual patient we encounter.

Moral injury in healthcare refers to the psychological harm experienced by healthcare professionals when they are unable to act according to their moral beliefs, often due to institutional constraints or ethical dilemmas. It is increasingly recognised that the context in which we all have to work can give rise to moral injury; all of us can probably easily recall recent patients for whom we have been unable to give all we would wish as a result of the challenges we all face.

Cambs LMC is always here to help. Our team can talk through difficult situations and offer pastoral support alongside practical advice; we can also help you manage complaints, workplace and contract issues, or any other problem leading to professional distress. We are your confidential safe space, and can help signpost you to other support, informal or formal, as you might need.

Please do keep in touch with us in these unprecedented times.

REMINDER

Clinical messaging systems

The use of inbuilt messaging functions in our clinical systems has become part of our everyday life in general practice, both in communicating with patients, with other members of the practice team, and with other healthcare professionals.

Cambs LMC sometimes made aware of complaints (informal and formal) that have arisen over unwise use of such systems; for example angry messages sent to other professionals when disagreeing, or inappropriate internal messaging in practices.

Fundamentally, any electronic message is auditable and readable by others, and any message that incorporates a patient's details becomes part of their clinical record. It is very easy to send something unwise in haste and far harder to manage the consequences. We advise all practices to have clear policies over internal messaging, and for all clinicians to be mindful of their professional obligations in communicating.

Inclisiran (Leqvio®) Prescribing

Inclisiran (Leqvio®) prescribing remains a topic of ongoing concern among practices. This guidance can also be found on our website.

Local formulary status:
Inclisiran is currently listed as a green drug in the Cambridgeshire and Peterborough formulary. This means that, in principle, GPs may initiate prescribing themselves, or continue treatment if it has been started in secondary care.

Clinical background:
Inclisiran is an injection-only lipid-lowering treatment used for patients with primary hypercholesterolaemia or mixed dyslipidaemia who have established atherosclerotic cardiovascular disease and whose lipid levels remain above target despite maximal tolerated oral therapy.

Professional guidance:
The RCGP has highlighted concerns regarding the trial data and the novel nature of the drug. The BMA considers that the prescribing and administration of inclisiran are not part of core GMS/PMS services, and that given the workload, governance and liability implications, practices should only provide it within a funded, locally commissioned service. Cambs LMC fully supports this position.

Key reminder for practices:
A drug's inclusion in the local formulary does not obligate a GP to prescribe it at the request of secondary care; it simply means prescribing is permitted if the GP chooses to do so.The responsibility for any prescription rests with the individual prescriber. We will continue to represent practices' concerns to ICB colleagues and are happy to advise regarding individual requests for prescriptions from secondary care.

Dental Presentations

We often hear from practices who receive requests either from dental colleagues or from patients in respect of dental pain and/or requests for prescribing.

General practitioners are not commissioned or indemnified to provide dental care. Responsibility for dental service provision rests entirely with the NHS dental commissioner. GPs cannot be expected to deliver dental care to any patient simply because access to dentistry is limited or unavailable. The commissioning gap does not transfer liability to general practice.

Our full guidance, which can be found on our website, aims to clarify responsibilities, outline good practice, and support GPs in managing dental-related presentations safely and appropriately.

Working & Treating Patients Overseas

With increasing mobility and the flexibility of modern technology, questions often arise about the provision of NHS care or advice to patients who are temporarily outside the UK, and whether GPs can themselves provide NHS services while based overseas. Cambs LMC has summarised, on our website, the key considerations, potential pitfalls, and where to go for further information and support.

The Cameron Fund

Please find attached link to the Winter newsletter which includes details of local GP, Dr Eimear Byrne's fundraiser half marathon next year!

Also see here, details of the Cameron Fund's Christmas Appeal for 2025.

Publication of the Medium Term Planning Framework

The NHS Medium Term Planning Framework for 2026/27 to 2028/29 has been published. The document sets out the national asks of integrated care systems for the next three years, with a section focusing on primary care: general practice, community pharmacy and dental services.

The framework sets out the ambition of same-day appointments for all clinically urgent patients (face-to-face, phone or online) at 90 per cent, with plans to consult with the profession on the new ambition.

Are you Sessional, Portfolio, Locum, First 5 or Retainer GP?

Why your Local Medical Committee Matters...

We represent all GPs and their practices in Cambridgeshire and Peterborough

Confidential, practical support

- The LMC is completely independent; we are not part of your practice, your PCN, or the ICB.
- We can advise on contracts, disputes, workload, maternity issues, and provide pastoral support.
- We can help you navigate complaints and the processes around professional regulation.
- We can assist you and your practice in resolving issues with other parts of the NHS system.
- We are your safe space for all Cambs GPs if something feels wrong in your professional life.

A professional voice, representing you

- We influence local and national discussions on workload, safe working limits, contracts, and the clinical interface.
- We represent the unique experiences of all GPs; including locums, sessional GPs, First5s, retainers, and registrars.
- We offer you the chance to feedback and influence policy, shaping the future of general practice.

Easy ways to get involved

- Sign up for our newsletter.
- Come and speak to us at local events.
- Attend our regular open meetings.
- Book an appointment either remotely or in person at our Duxford office.

Contact us at office@cambslmc.org.

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NATIONAL UPDATES FROM BMA

LMC England Conference 2025 update

The 2025 LMC England Conference took place last week in Manchester, where we debated our current dispute around not just the lack of any safeguards to mitigate patient harm with recent online access changes, but also the broken government promise over a new GMS contract, with motions calling for GPC England to prepare for mass non-compliance, onward balloting of the profession, and collation of undated resignations of practice contracts. The resolutions from the Conference will be published shortly. For more information about the LMC Conference see here: Local medical committees.

We stand together - united as a profession on the brink: practices feeling unsafe; GPs under-employed; partners exhausted, sessional GPs frustrated. As your GPC England officers, we stand ready: to get back round the negotiating table and to stand ready to lead if the profession takes the decision to act. It is easy to feel the pressure, but the power to change everything is in our gift.

Watch a clip of Dr Katie Bramall's speech

Online consultation survey

Thank you to everyone who took the time to respond to BMA's recent online consultation survey. More than one in five practices in England responded – over 1,300 unique and validated responses were recorded.

Together, these practices represent nearly 14,000,000 patients – over 20% of England's registered patient population.

The survey results will help BMA evaluate the impact of the October 1st regulations coming into effect, which mandate GP practices in England to keep online consultation platforms open during core hours. GPCE officers have been consistent with government since Wes Streeting set out his ambition last December – current online consult tools preclude the ability to safely discriminate between urgent and routine patient need. The current contractual expectations go beyond what was agreed in good faith at the start of the year. But irrespective of semantics and wordplay from government, patient safety is at risk now.

Initial findings indicate that the regulations are putting patients at risk, and safeguards are clearly required to prevent urgent requests filtering through as routine or admin requests. In addition, practices are reporting an increased, and unsustainable, volume of requests since October 1st; with a changing attitude in patients reflecting a transactional, rather than holistic, style of medicine.

The BMA is currently crunching the numbers and analysing the many free-text responses, and will be ready to share results shortly.

Resident doctors' and GP registrars' strike action guidance

Resident doctors (including GP trainees) are taking industrial action from tomorrow, 14 November, after 90% voted in favour of to strike over pay erosion and insufficient specialty training places, after the Government has failed to present a credible offer to restore their pay or fix the specialty training crisis in England.

GP Registrars have the full support of GPC England, general practice and the wider profession during the strike action.

Ahead of the strikes we published guidance for practices, LMCs and GP trainers, advising on how practices can support their GP registrars and manage strike days. Read the guidance

Read also the guidance on striking as a GP Registrar.

NATIONAL UPDATES FROM BMA

GPC England dispute over contract changes

BMA remains in dispute with the government, however this does not mean practices can ignore the contractual changes that were implemented on 1 October 2025, nor can GPC England or LMCs recommend or endorse such an approach. Declaring a dispute is akin to declaring compliance with the new contractual requirements in the 25/26 contract agreement in March 2025, but "under protest".Therefore, practices must:

- have an online consultation tool, which is available to registered patients throughout core hours (8am – 6.30pm), to allow them to make non urgent / routine appointments requests, medication queries and administrative requests and;
- ensure GP Connect (Update Record) write access functionality is enabled;
- Whilst many practices are struggling, we would remind you that support and guidance for practices in relation to the contract changes is available here: Campaigning around GP contracts in England.

As BMA prepares for further escalatory options, please encourage any GPs or GP registrars who are not BMA members to join so that they may vote in any potential future ballot, and ensure your own membership information is up to date.

Following the LMC England Conference, GPC England is now considering all our options and what our next steps should be. The safety of patients and working in the best interests of you and your team is BMA's first concern.

Access all the guidance: Campaigning around GP contracts in England

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NHS reforms - Neighbourhood health service

At the NHS Providers Conference yesterday, the Secretary of State for Health, Wes Streeting, announced plans to deliver the next phase of integration of NHS England with savings to be reinvested in 'frontline care'. The reforms will give more power and autonomy to local leaders and systems to reduce red tape and bureaucracy, so they have more freedom to better deliver health services for their local communities. What this means for general practice and its commissioning is far from certain.

The Government has committed to reducing the running costs of Integrated Care Boards (ICB), with a more clear and focused purpose as strategic commissioners than previously. ICBs will be tasked with transforming the NHS into a neighbourhood health service, with a greater focus on preventing illness. This will mean ICBs will be leaner organisations, with half their current posts removed.

If the government plans are to have any hope of success, they will need GPs around the table leading local discussions. How general practice engages with these reforms, and what we collectively decide could make or break the current ambitions of the Ten Year Plan. The government's key three aspirations are largely already delivered by our profession: analogue to digital (we have been paperless for years); sickness to prevention (we actively want to push prevention rather than react to political 'access' targets) and hospital to community – but we see precious little evidence of this happening. It is clear that general practice is the clear solution to so many of the government's current challenges, they need to start moving away from labelling us as the problem.

Read more: Billions to be redirected back into patient care with NHS reform - GOV.UK

SUPPORTING FUTURE EDUCATORS

COHORT 9 Now open!

If you are interested in becoming a GP Educator, find out how our SFE programme can help guide you through the blended learning. Cohort 9 is now open for applications, visit our web page for more information on what to expect, planned dates and how to apply. Find out more

PROTECTED LEARNING TIME SESSIONS

Wednesday 19 November 2025

- Fit Notes and Supporting Return to Work: A Multidisciplinary Approach (14:30-16:45) Click here to book
- Foundations of Quality Improvement in General Practice (14:30-15:30) Click here to book

Please visit our PLT web page for more information on sessions planned for protected learning time.

GP KEEPING IN TOUCH (KIT) SESSION: SAFEGUARDING

Thursday 20 November, 19:00-20:30

Our Keep in Touch (KiT) sessions are designed for any Cambridgeshire & Peterborough GP not in regular everyday practice, whether due to maternity, sick leave, or other circumstances which leave you feeling out of the loop. Join us for this interactive case-based learning session with a safeguarding focus. Click here to book

GP APPRAISAL & REVALIDATION UPDATE

Thursday 27 November, 19:00-20:30

Join Dr Paula Newton for an update on the process and requirements of appraisal and revalidation. Appropriate for GPs at any career stage, to remind and refresh themselves on this topic. Click here for more info and to book.

CoSRH DIPLOMA (DCSRH)

Are you interested in the CoSRH Diploma (DCSRH)? C&P Training Hub has re-opened Expressions of Interest for our training scheme to support local primary care clinicians wanting to undertake The College of Sexual & Reproductive Healthcare's Diploma and Letters of Competence for intrauterine techniques and sub dermal implants in Cambridgeshire and Peterborough. Click here for more information and to register your interest.

COACHING & MENTORING FOR GPS

CPTH offers Coaching and Mentoring, a key professional development tool, for GPs and a variety of other general practice roles.

We also have a small team of Professional Nurse Advocates (PNAs) available for restorative clinical supervision, career conversations or improvement project support. Find out more

PARENTAL LEAVE

Are you a GP who has started or is about to embark on parental leave?

Sign up for Career Break Support and we'll provide a coach/mentor for you to discuss your plans with, invite you to Keep in Touch sessions and provide access to a small CPD grant to support your return to work. Click here to find out more.

Support and Signposting

Representing

Supporting

Advising

Cambs LMC is always here to represent, support and advise GPs and their practice teams in a safe, confidential space if you are struggling or in distress. We actively encourage you to reach out to us.

Visit our website for more information or snap the QR code:

Email office@cambslmc.org to receive our updates

Vacancies in General Practice

We advertise any roles in General Practice on our website: **https://cambslmc.org/jobs/**. This remains a free service to our constituent practices in Cambridgeshire & Peterborough. To advertise a vacancy in your practice, please email us the details, including the closing date and any supporting documents in to **office@cambslmc.org.**

Practices seeking GP Locums - We continue to forward any GP Locum availability you might have to our locum mailing list. When sending requests to **office@cambslmc.org** to forward on.

Please remember to include a short synopsis of your practice in your requests i.e. where you are, what clinical system you use and relevant contact information.

BMA Wellbeing

View BMA wellbeing support services page here:

https://www.bma.org.uk/advice-and-support/your-wellbeing

A range of wellbeing and support services are available to doctors, and we encourage anybody who is feeling under strain to seek support, such as the BMA's **counselling and peer support services**, **NHS practitioner health service** and non-medical support services such as **Samaritans**. The organisation **Doctors in Distress** also provides mental health support for health workers in the UK. We have produced a **poster with 10 top tips** to help support the wellbeing of you and your colleagues.

The **Cameron Fund** supports GPs and their families in times of financial need and the **RCGP** also has information on GP wellbeing support.

Visit the BMA's **wellbeing support services page** or call **0330 123 1245** for wellbeing support.

CQC Guidance

Guidance for GPs
Youtube
GP Mythbusters

PCSE Guidance

Guidance Pages
Monthly Updates
Youtube

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