



## It's Coming Home...



Before you tell us off for making that call too early, perhaps we should say “**She’s** coming home...”

Last week we learned that Dr Katie Bramall has decided not to seek re-election as Chair of the BMA’s General Practitioners Committee (GPC) for England. This means she will be returning to her role as Chief Executive Officer of Cambs LMC after the summer break.

We are delighted to welcome her back. In truth, Katie has never been far away from the work of the LMC, but having her return means general practice across Cambridgeshire and Peterborough will once again benefit from her exceptional expertise, experience and leadership at a time when it matters most.

The LMC team will undergo a small reshuffle as responsibilities that have covered Katie's time away return to their usual arrangements. Alice Benton's appointment as Chief Operating Officer has now been made permanent, working a slightly reduced week, while Dr Diana Hunter will return to her substantive Chair role and usual hours.

We would like to extend our sincere thanks to Diana for her leadership during this period. We would also like to thank the wider LMC team for the flexibility and support they have shown over the past three years.

This change in the LMC team also coincides with great change, challenge and opportunity in the local health system and having Katie back will help to ensure that general practice is well positioned to influence how our local health system evolves, rather than simply responding to decisions made elsewhere.

As we have updated you over recent months, the formation of the Central East ICB continues. Bringing together three former ICBs into a single "super-ICB" was never going to be straightforward. Alongside the creation of pan-system directorates, we are seeing significant reductions in ICB staffing and changes to many of the systems and relationships practices have become accustomed to.



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These changes are already becoming apparent. The clinical support tool has been paused, new teams are taking responsibility for services such as IT support and data protection, and practices are contacting us for advice as they navigate unfamiliar processes and consider requests to sign revised agreements. A key part of the LMC's role is to represent your concerns, challenge changes where necessary, and ensure that essential support systems are not withdrawn or redesigned without proper consideration of the impact on practices and patients.

At the same time, much of the wider conversation is rightly turning towards neighbourhood health, out-of-hospital care and closer integration between providers. These developments present opportunities for general practice, provided we are active participants in shaping them. We continue to learn from other areas, bringing both successes and lessons into local discussions. We also know the reality facing practices: demand has increased at an extraordinary pace, while the wider community services needed to support patients and reduce pressure on general practice are taking much longer to change.

Against this backdrop, we believe there is an important opportunity to think differently about how services are commissioned and provided. The existing PCN DES has built strong foundations, but as neighbourhood working matures it is increasingly clear that a one-size-fits-all national specification will not always deliver what local populations need. The ability to agree sensible local variations to the PCN DES will provide the flexibility to develop genuinely integrated neighbourhood services that reflect local priorities while retaining the strengths of the national framework.

As integrated neighbourhood teams embed, commissioning arrangements will need to support practices working differently with community, mental health, social care and voluntary sectors around shared populations and outcomes. If we get this right, we have an opportunity to shape local neighbourhood contracting in a way that builds on the trusted relationships and infrastructure that general practice has already created through Primary Care Networks, rather than replacing them.

The coming months will continue to bring uncertainty, but they also offer an opportunity to influence the future direction of primary care much closer to home. With Katie returning, we are well placed to ensure that the voice of general practice continues to be heard loudly, constructively and with purpose as that future is designed.

## Cambs LMC Practice Management Conference 2026:

The Cambs LMC Executive Team delivered a conference, for constituent practice and PCN managers, bringing together specialist presenters to provide a bespoke programme supporting practice management teams in developing their knowledge, skills and resilience.

The day began with keynote speaker Jenny Melling, who shared powerful insights on drawing on our inner reserves to help us do hard things. Speaking with candid authenticity and humour, Jenny shared stories from her career in the Metropolitan Police and her recent endurance challenge on ITV's The Summit.

The programme continued with sessions from Gillian Booth from the Training Hub, Pam Green from Central East ICB, Melanie Gearing from IGPM, and subject-matter experts covering key topics including complaints, cyber insurance, practice finances, and employment law updates. The day concluded with a highly engaging session on how to prioritise powerfully, set boundaries, say no and deal with pushback.

Alongside the learning sessions, delegates had opportunities to network with colleagues and meet external organisations exhibiting at the event.

Feedback from delegates, presenters and exhibitors was extremely positive, with encouraging comments received both on the day and through follow-up emails. The feedback also provided valuable suggestions to help shape and enhance future Cambs LMC events.



## GP LIST CLEANSING

### ➤ Is your Practice checking every deduction?

Many practices across England are reporting a significant increase in GP list cleansing activity. While list reconciliation and the FP69 process are routine parts of maintaining accurate patient registers, the scale and pace of the current national exercise have raised concerns.

The BMA has reported that GP practice lists have reduced by around 344,000 patients over the past six months, with an estimated £40 million reduction in Global Sum funding. Alongside the financial impact, there are concerns that some patients could be removed from practice lists incorrectly.

Following the NHS England communication issued via the ICB today, practices are also reminded that, despite the safeguards described, it remains important to review all proposed list deductions carefully and challenge any that appear incorrect.

Practices are encouraged to review GP Practice List Reconciliation reports and FP69 notifications promptly, investigate any unexpected deductions, and challenge Primary Care Support England (PCSE) where appropriate. Keeping clear records of queries and ensuring patients have not been removed in error is essential.

Practices should not assume every proposed deduction is correct. Local knowledge of patients is often more accurate than national data-matching exercises, and careful scrutiny can help prevent inappropriate removals.

Cambridgeshire LMC is also keen to understand the impact locally. If you identify false or inappropriate deductions, disruption to patient care, or cases where patients may have been disadvantaged, for example because of language barriers, learning disabilities, or other protected characteristics. Please let us know at [office@cambslmc.org](mailto:office@cambslmc.org).

For further information, practical advice on what to check, and details of the evidence we are collecting, please visit our [GP List Cleansing Guidance webpage](#).

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## MGUS MONITORING

### ➤ Cambs LMC website page and template notice letter

Further to our newsletter article last month, to support practices that choose to serve notice on MGUS monitoring, the LMC has produced an [MGUS Monitoring page and template notice letter](#) which are available on our website.

We would also be grateful if practices could inform the LMC of any decision to serve notice so that we can continue to provide support and representation. If you have any questions, please contact the LMC Office.

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## VACCINATION PROGRAMMES REMINDERS

### ➤ Publication reference: PRN02509 - 02 July 2026

A reminder of the recent flu letter from NHS England, setting out its aims for the programme and additional guidance for the vaccination programmes, including sign up process and deadlines.

[Flu Vaccination Programme letter - 02 July 2026](#)

[Season Vaccination Programmes - additional guidance](#)

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# BMA COLLECTION ACTION

## July 2026 Action: New Shared Care Requests

This short guide supports practices wishing to take part in the July 2026 collective action on new shared care requests.

- **Agree the practice position.** Partners should confirm whether the practice will decline new shared care requests that are not clear, safe and adequately resourced.
- **Keep the focus on safety.** The action is not about abandoning patients. It is about ensuring practices only accept new responsibilities they can deliver safely.
- **Check whether the request is formal.** Look for an approved protocol, clear responsibilities, current specialist contact details, escalation routes and monitoring arrangements.
- **Check whether it is resourced.** Shared care is voluntary. Practices should not take on new unfunded prescribing, monitoring or administrative workload without adequate support.
- **Decline informal requests where appropriate.** If the request is unclear, unfunded, unsupported or clinically unsafe, the practice may decline and ask the requesting service to retain responsibility.
- **Review existing arrangements separately.** Check that current protocols remain up to date and identify any prescribing taking place without formal agreement.
- **Brief the team.** Make sure clinicians, prescribing staff and relevant administrative staff know how to manage new requests.
- **Keep a simple record.** Record the practice decision, requests received, decisions made, reasons for declining and any advice sought.
- **Monitor and escalate.** Watch for patient concerns, repeated requests, specialist queries or commissioning issues. Seek LMC advice where needed.

**In summary:** accept new shared care only where it is formal, current, safe and resourced. Decline new informal or unfunded requests where appropriate and keep patient safety at the centre of decision-making.

Cambs LMC guides for each actions so far can be found on our website:

<https://cambslmc.org/guidance/contract-support/bma-collective-action-2026/>



#### Important note:

Patient safety remains central. Review existing arrangements separately and ensure current protocols are up to date.

## New GPCE Chair and Officer Team

Dr Clare Bannon has been elected as the new chair of the General Practitioners Committee for England (GPC England). Dr Bannon will start her new role from Thursday, 9th July, when she will take over from outgoing chair Dr Katie Bramall, who has held the position since 2023.

A GP based in Barnsley since 2010, Dr Bannon has held a variety of roles within the clinical commissioning group (CCG), integrated care board (ICBs) and local medical committee (LMC) locally. On GPC England she has served as Deputy Chair and as Policy Lead for both Clinical and Prescribing, and Practice Business since joining the committee in 2021. She has led on national work for prescribing COVID therapeutics and recently led work exploring alternatives to GP-issued fit notes to reduce unnecessary workload. Celebrating the result, Dr Clare Bannon chair-elect said:

*"I am delighted to have been elected chair of GPC England. This is a demanding role at an incredibly challenging time for the profession, but I believe those challenges can be overcome."*

*"My focus will be on representing the interests of GPs, improving patient care, transforming general practice, and helping to bring together a fractured primary care system. The future of general practice is too important to leave to chance."*

*"GPs are seeing more patients than ever, with increasingly complex needs, while our responsibilities continue to grow with little support. As chair, I will seek to unite the committee behind a strategy that improves the working lives of GPs across the profession, including for sessional colleagues on whom practices rely so heavily on."*

*"Every GP deserves to feel valued, supported and represented. That is the culture my leadership will foster, and those are the values I will demonstrate. I must emphasise that despite the change in leadership, I remain ready to ballot the profession and proceed with further action if another unacceptable contract is imposed. I want to take a collaborative approach but that should not be mistaken for weakness."*

*"I also want to thank Dr Katie Bramall for her generous contribution to the profession. She has given so much of her personal and professional time to furthering the interests of GPs, from negotiating with successive governments and leading GPs through two rounds of collective action, to securing the largest GMS investment since 2004."*

*Katie's impact will be felt for generations to come, and we thank her."*

The BMA's General Practitioners Committee for England (GPCE), met yesterday, (Thursday, 9th July) and elected Dr David Wrigley, Dr Shan Hussain and Dr Manu Agrawal as the new officers of GPCE under the leadership of recently announced GPs committee chair Dr Clare Bannon.

Commenting on the elections, Dr Bannon said:

*"With collective action still underway, the focus of my officer team and I will be on ensuring that we continue to support, and fight for, the profession during an incredibly challenging time."*

*"The committee will be relentless in championing the interests of GPs and patients, improving care, and rebuilding the connection between practice and community."*

*"Over a week ago, we announced a further escalation in our collective action. A change in committee leadership does not mean an immediate end to this work. So, my message to Government is quite clear: we want to work with you to meet the long-term challenges general practice faces and finally bring an end to our dispute. Only by working together can we ensure the future of the profession and the care patients deserve."*

# GP & ACP EDUCATION



**ACP& GP Education Programme - Frailty**  
**Wednesday 15 July 2026 (7:00pm - 8:30pm)**

This month we'll be joined by Helen Hayhoe for an update on frailty, with a focus on recognising frailty syndromes, management of medical complexity in this patient group and dealing with uncertainty. [Click here](#) to book.

**ACP/GP Lunch and Learn – GLP1 Prescribing**  
**Tuesday 25 August 2026, 1:00pm - 2:00pm**

A lunch and learn speaker session led by Dr Jessica Randall-Carrick. [Click here](#) to book.

## ➤➤➤ SUPPORTING FUTURE EDUCATORS

Our latest cohort is now live for expressions of interest. If you are looking to become a GP Educator, find out how our Supporting Future Educators (SFE) programme can help guide you through the blended learning. [Click here](#) for more information.

## ➤➤➤ PRIDE IN PRACTICE

We are delighted to offer another opportunity for practices in Cambridgeshire & Peterborough to apply for a funded place on the LGBT foundation Pride in Practice 12-month programme. This provides training and an accredited award, as well as ongoing support and resources. Closing date 5pm, 16th July 2026. [Click here](#) for more information and how to apply.

## ➤➤➤ BELONGING TO PRACTICE

Our new series of Belonging in Practice webinars continues to explore belonging in practice with sessions on IMGs, neurodiversity, LGBTQ+ inclusion, race and identity, and sustainable careers for all staff working in General Practice in Cambridgeshire and Peterborough. To find and book workshops in the series [click here](#).

## ➤➤➤ RED WHALE GP UPDATE

Places are available on our annual Red Whale Update on Thursday 1<sup>st</sup> October 10:00-16:00 at £75.00 per person after discount/subsidy. [Book here](#).

## ➤➤➤ GP PROFESSIONAL DEVELOPMENT (CPD) GRANT

Our GP Professional Development (CPD) Grant is designed to support GPs working in Cambridgeshire & Peterborough to develop an area of special interest that supports the work of General Practice. Limited funding available, find out more and [apply here](#).

## ➤➤➤ ARRS GP SUPPORT & DEVELOPMENT PROGRAMME

This programme offers access to education, mentoring and peer support for GPs within their first 5 years of practice who are employed under the Additional Roles Reimbursement Scheme (ARRS) in Cambridgeshire and Peterborough practices. [Click here](#) for more info.

## ➤➤➤ COACHING AND MENTORING

CPTH offers Coaching and Mentoring, a key professional development tool, for GPs and a variety of other general practice roles. [Find out more here](#).

# 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:



## 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](mailto: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](mailto: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.



Email [office@cambslmc.org](mailto:office@cambslmc.org) to receive our updates

## 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](tel:03301231245) for wellbeing support.

### CQC Guidance

Guidance for GPs  
Youtube  
GP Mythbusters

### PCSE Guidance

Guidance Pages  
Monthly Updates  
Youtube

## Contact us:

email: [office@cambslmc.org](mailto:office@cambslmc.org)  
website: [www.cambslmc.org](http://www.cambslmc.org)

