Newsletter

July 2026

Sheffield LMC

INSIDE THIS ISSUE:

TIRZEPATIDE

We have been advised that the previously suggested Local Enhanced Service (LES) for Tirzepatide will no longer be taken forward. The working assumption is that the activity and associated funding have now been absorbed into the Quality and Outcomes Framework (QOF) rather than being supported via a separate LES.

South Yorkshire LMCs (SYLMC) do not consider the current QOF-linked funding to be adequate to provide the level of care that patients require in relation to tirzepatide and wider obesity management. The workload associated with safe initiation, monitoring and follow-up is significant and is not matched by dedicated, commissioned funding.

Accordingly, SYLMC advise practices to think very carefully before initiating tirzepatide, taking into account:

- **The absence of a dedicated LES**
- **The additional clinical and administrative workload**
- **Existing pressures on core and QOF activity**
- **The need to maintain safe, sustainable workloads for the whole practice team**

The SYLMC continues to negotiate with SYICB regarding appropriate commissioning, funding and support for this area of work, and advised it will update practices as discussions progress.

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QOF OBESITY INDICATOR OB005

GPC England has produced guidance for practices on QOF indicator OB005, following its introduction as part of the imposed changes for 2026/27. The BMA have serious concerns about the financial viability of achieving the associated QOF points, given the workload implications involved, and are extremely disappointed by reports from across England that ICBs have withdrawn locally commissioned services for prescribing and monitoring of Tirzepatide following the introduction of these indicators, which we repeatedly highlighted and cited as a concern and possibility during the 2026/27 contract consultation on the proposed changes.

The BMA have written to NHS England to raise these concerns and are continuing to discuss the situation.

Read about the 26/27 contract changes and the BMA's dispute with Government

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PRESCRIBING RESPONSIBILITIES AND PROCESSES IN GENERAL PRACTICE

Following the Primary Care Provider Alliance meeting on Tuesday 30th June, a document was shared developed by South Yorkshire ICB for Prescribing Responsibilities and Processes in General Practice.

The document has been developed by SYICB to support GP practices across South Yorkshire to:

- Promote a shared understanding of what constitutes prescribing
- Clarify the roles, responsibilities and limitations of prescribers and non-prescribing clinicians
- Support safe, proportionate and auditable practice prescribing processes
- Reduce variation and uncertainty while enabling effective multidisciplinary working

Please see here to view the full document.

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FP69s, List Cleansing and the £40 Million Question

Across England, practices are witnessing an unprecedented acceleration in patient list cleansing. What might appear to be a routine administrative exercise has rapidly become one of the most significant financial and operational challenges facing general practice this year.

Over the past six months alone, GP practice lists have fallen by 344,000 patients. At current Global Sum rates, that represents more than £40 million removed from core general practice funding at a time when practices are already operating on razor-thin margins.

As Dr Helen Salisbury recently observed in the BMJ, "While no one argues that practices should be funded for patients who have genuinely moved away, the consequences of large-scale list reductions cannot be ignored. These deductions translate directly into lost clinical capacity, reduced staffing flexibility and increased financial instability."

The current exercise differs from previous list validation programmes in both scale and speed. Writing to Primary Care Minister Stephen Kinnock this week, the BMA have expressed serious concerns that patients are now being given just three months to respond before removal, rather than the six months traditionally allowed. The result is not only a more abrupt financial shock for practices, but also a heightened risk that vulnerable patients are incorrectly removed from their registered GP.

Those most likely to be affected are often those least able to navigate administrative processes: older people, patients with learning disabilities, those with limited English proficiency, and individuals with unstable housing arrangements. Many may never receive correspondence, may mistake it for a scam, or simply fail to appreciate the consequences of not responding. Meanwhile, practices are having to scrutinise hundreds of proposed deductions, creating a substantial additional administrative burden. Time and resources that should be focused on patient care are instead being diverted into checking lists and attempting to prevent inappropriate removals.

The profession is entitled to ask some difficult questions. What assessment was undertaken of the impact on vulnerable patients and health inequalities before this programme was accelerated? Why was the response period shortened? And perhaps most importantly, where is the funding going? The money removed through list cleansing is core GMS funding. If patient lists are being corrected, then the corresponding resources should be transparently recycled back into Global Sum so that funding continues to follow patient need. GPC England has received little clarity about whether these savings will be reinvested in general practice. Read the BMA's 'focus on' guidance on patient list cleansing here

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Parliamentary Early Day Motion Future of GP services in England

A number of MPs, led by primary sponsor Ian Byrne MP, have tabled a parliamentary Early Day Motion (EDM) on future GP services in England. An EDM is a parliamentary motion which includes a statement and ask of government which MPs sign to show their support. The EDM references GPCE's motion on a Plan B, or an alternative strategy for general practice. It raises concerns about the motion as well as the current workloads facing GPs and calls on the Government to address the concerns of GPs and ensure the future of general practice in England as a comprehensive service available to all free at the point of need.

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Time limited Meningitis B vaccination programme in Community Pharmacy

The BMA were disappointed by NHS England's decision to commission a time-limited Men B vaccination programme for adolescents from community pharmacy providers, without providing an option to sign up for general practice. This is despite the efforts and hard work of local GPs to provide vaccination and treatment during the recent outbreak in Kent.

Following this, and the recent extension of childhood flu vaccination for community pharmacy, the BMA have written to NHSE and the Department for Health and Social Care (DHSC) to raise their concerns with the strategic direction of vaccination services in England, and reaffirm the critical central role of General Practice in vaccination services and protecting the nation's health across the population.

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EMIS Web Dispensing Module

GPC England has welcomed NHS England's decision to extend the current national funding arrangement for the EMIS Web dispensing module until **31 March 2027**, providing much needed certainty for dispensing practices across England.

The agreement follows sustained engagement by GPCE on behalf of dispensing practices, many of which serve rural, remote and coastal communities where timely access to medicines is critical for patients.

Under the extension, practices will see no immediate change to existing funding arrangements or practice-facing charges, ensuring continuity of service and avoiding additional financial pressures in the short term. During this period, NHSE has also committed to working with system suppliers and representative bodies to consider future approaches to the funding of dispensing modules.

Please forward any articles for inclusion in the LMC newsletter to
manager@sheffieldlmc.org.uk

Submission deadlines can be found here

Contact details for Sheffield LMC Executive can be found here
Contact details for Sheffield LMC Secretariat can be found here

Sheffield LMC

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