

Dear colleagues

**Local action: Stay safe, stay organised, stay united**

GPC England's national dispute with Government may be over, following the acceptance of the 2025/26 contract, but the importance of local action to resolve ongoing commissioning gaps continues. Read our latest local action guidance [on our GP campaign page](#)

We continue to strongly advocate for [safe working](#) and encourage practices to identify unfunded and underfunded work in their areas and to engage in local action to address commissioning gaps. When locally commissioned pathways fail or there are service gaps, practices should initiate re/negotiations, via their elected LMC representatives, with ICBs to secure appropriate resourcing.

Practices who are undertaking under/unfunded work should either be fully resourced, to ensure patient care – for some of the most vulnerable people in society – is sustainable, or, with the support of their LMC, consider serving notice to ICBs. LMCs are integral to facilitating fair and effective local agreements between practices and commissioners – supported by our national advice and resources. This is simply business as usual local action, coordinated by your LMCs, which has been happening for many years.

Our [safe working guidance](#) continues to be GPC England policy and is regularly updated. New planned 2025/26 contractual asks, such as patient access to e-consultations for routine care as well as requesting fit notes or medication queries, does not mean GP practices must offer unlimited capacity that jeopardises patient or staff safety. The safe working guidance includes [template letters](#) which help practices manage workload and limit capacity to deliver safe, high-quality care.

All colleagues are encourage to read [GPC England's guidance on the 2025/26 contract changes](#), where further additional related guidance will be added in the coming days and weeks.

**GP Contract Webinars 2025**

All colleagues are invited to join us to hear the GPC England Officer team discuss the detail of the changes in the GP Contract and its funding for 2025/26. After the presentation there will be time for questions and answers.

- Wednesday 9 April      19:00-21:00      Register [here](#)
- Thursday 10 April      12:00-14:00      Register [here](#)
- Wednesday 23 April      19:00-21:00      Register [here](#)
- Thursday 24 April      12:30-14:30      Register [here](#)

Read more about the contract changes, our advice and the webinars: [GP contract 2025/26 changes](#)

**National Insurance Contributions Bill**

The Government has continued to reject Lords amendments to the [National Insurance Contributions \(Secondary Class 1 Contributions\) Bill](#) which would potentially exempt GPs from ENICs (Employers National Insurance Contributions) increases. They have used the reason that the Lords Amendment 'interferes with the public revenue' which is inappropriate as the elected chamber The Commons has final say on tax and financial issues (a position dating from the Parliament Act 1911) and has used its majority to push the Bill through. The Bill will now receive Royal Assent, becoming law on 3 April 2025.

### Over half of GPs in England have missing years of pensions data

BMA's recent [Freedom of Information](#) request has revealed that 56% of GPs in England have missing pensions records up to 2022/23, with 156,896 years of pension data missing in total. This matters because without your pension record being up to date you cannot determine potential tax charges and whether you can increase work without penalty, nor make informed decisions about your pension savings. This is also important for those affected by the McCloud remedy. [We have highlighted Capita's failures in the media](#) and calling for an urgent solution to this significant issue.

We continue to meet with Capita, NHS BSA and NHSE to put pressure on them, and although we had verbal commitment that they will write to affected members with specific personalised information in relation to missing years in pension records, no timeline was provided. Whilst we firmly believe this is a problem that Capita, NHS BSA and NHSE need to work together to resolve, you can also take action to make sure your record is up to date and encourage you to do so and we have produced [step-by-step guidance](#) to help you.

### GP pressures

The latest [GP workforce data](#) shows that the NHS had the equivalent of 28,248 fully qualified full-time GPs in February 2025. While fully qualified GP FTE has been slightly rising since July 2023, there are still the equivalent of 1,116 fewer fully qualified full-time GPs than we did in September 2015. At the same time, there has been a rise in the number of patients, with February 2025 seeing yet another record-breaking number, where GPs are now responsible for about 17% more patients than in 2015, creating significant workload pressures.

Despite these pressures, approximately 29 million standard appointments were booked in February 2025, with an [average of 1.41 million appointments per working day](#). Of these, 44% of appointments were booked to take place on the same day, and 83% of were booked to take place within 2 weeks. 64% of appointments in February were booked to take place face to face.

Read more about GP pressures on our data analysis page: [Pressures in general practice data analysis](#)

### GPC England regional elections

The General Practitioners Committee England (GPCE) has opened voting for members of the committee for the 2024-2027 sessions from the following regions:

- *Barking & Havering, Redbridge & Waltham Forest and City & Hackney*
- *Cumbria and Lancashire*
- *South & West Devon and Kernow*
- *Kent*
- *Surrey and Croydon*
- *East Yorkshire, North Lincolnshire and Lincolnshire*
- *Calderdale, Kirklees, Leeds and Wakefield*

Voting will close at 12pm on Monday 14 April 2025

For more information on these elections, please visit the [GPC England website](#).

The BMA is also running elections for the Sessional GPs Committee – find out more [here](#).

**Freedom of Information requests to LMCs**

GPC England was informed that a patient contacted an LMC with a Freedom of Information (Fol) request via a website advising on this. LMCs are advised that the Freedom of Information Act 2000 ('the Act') only applies to public authorities listed in Schedule 1 of the Act or otherwise designated by an order of the Secretary of State under section 5. LMCs are not listed in Schedule 1 and have not been otherwise designated as subject to the Act.

While LMCs are referred to in statutory law they are not created by statute, and operate independently of government and the NHS. The NHS Act 2006 provides merely that LMCs may be 'recognised' by NHS England, and NHS England may be required to consult with LMCs over its work relating to general practice. Therefore, LMCs are neither public bodies in the sense of being created by government or performing public functions, nor public authorities under the Freedom of Information Act. As such, GPC England has requested that LMCs are removed from their website in relation to making Fol requests, and are also highlighting this position to all LMCs..

**Rotational training survey**

The BMA, as part of the pay offer to English Resident Doctors, has agreed to undertake a review into rotational training with the UK Government. Additionally, the BMA is in discussions regarding reforms of rotational training in Scotland, Wales and Northern Ireland that are separate to this review. Rotational training is the current form of training whereby resident doctors 'rotate' between trusts/health boards and, in many cases, employers across their training programme.

In order to ensure the BMA can achieve the best possible reforms to the system, we are asking GPs who are educational clinical supervisors to respond to some questions about the role. The [survey](#) asks about the rotational training system from your view as an educational clinical supervisor for rotating doctors, which will inform how we can deliver substantive, useful changes. Take the survey [here](#).

**GP focus group - primary care provision for refugees and asylum seekers project**

As part of a project to improve the provision of primary healthcare to people seeking asylum and refugees, the BMA's International team will be holding a focus group online on **4 June 2025, 14:30-16:30**. Input from the group will help lobby the government to better support doctors in providing high-quality healthcare, and inform updates to the [BMA's Refugee and Asylum Seeker Patient Health Toolkit](#). If you would like to attend the focus group or find out more, contact [info.international@bma.org.uk](mailto:info.international@bma.org.uk).

- [The BMA's GP campaign 'Staying safe, organised and united' webpage \(England\)](#)
- [GPC England guidance on the 2025/26 contract changes](#)
- [GPCE Safe working in general practice guidance](#)
- Read more about the work of [GPC England](#) and practical guidance for [GP practices](#)
- See the latest update on X [@BMA\\_GP](#) and read about [BMA in the media](#)
- Contact us: [info.lmcqueries@bma.org.uk](mailto:info.lmcqueries@bma.org.uk)

GPCE bulletin: [Local action guidance](#) | [GP contract webinars](#) | [National Insurance Contributions Bill](#)

Read the latest [Sessional GPs newsletter](#)

Dr Julius Parker  
GPC England deputy chair  
Email: [info.lmcqueries@bma.org.uk](mailto:info.lmcqueries@bma.org.uk) (for LMC queries)  
Email: [info.gpc@bma.org.uk](mailto:info.gpc@bma.org.uk) (for GPs and practices)