



GLASGOW LOCAL MEDICAL COMMITTEE LIMITED

9th October 2026

www.glasgowlmc.co.uk

To All GPs and GP Practices

Welcome to our October newsletter.

GP and Practice Manager Meeting / LMC AGM

Thank you to all GPs and practice managers who attended our annual meeting at Hampden Park on 23rd September 2026.

The meeting provided an opportunity to discuss some of the significant challenges currently facing general practice, including the ongoing GP IT migration programme, practice sustainability and safe working arrangements. We were also pleased to welcome Dr Iain Morrison, Chair of the Scottish General Practitioners Committee (SGPC), who provided a national update and discussed the recently published SGPC guidance.

We appreciate the questions and feedback received from colleagues and will continue to represent the concerns of GPs and practices in our discussions with NHSGGC, Scottish Government and other relevant organisations.

GMS Uplift

Details of the 2026/27 GMS funding uplift were circulated on 18th September 2026, following agreement between Scottish Government and SGPC. The uplift is backdated to 1st April 2026.

The settlement provides a 4.7% increase to the Global Sum and a 4.3% increase to the Income and Expenses Guarantee. Locum reimbursement limits under the Statement of Financial Entitlements, together with fees for the Cardiovascular Disease and Frailty Directed Enhanced Services, will also increase by 4.3%.

The uplift reflects the 3.5% GP pay award recommended by the DDRB, together with assumptions about practice expenses and staffing costs.

The Agenda for Change pay settlement for NHS Scotland staff is factored into the uplift. The uplift calculations include a 3.9% allowance for practice staff costs. SGPC encourages practices to seek to keep pace with the Agenda for Change settlement where financially possible, recognising the importance of recruitment and retention.

Practices are reminded of their contractual obligations concerning salaried GP terms and conditions, including the requirement to provide terms no less favourable than the BMA model salaried GP contract, which provides for annual increases in line with Scottish Government GP pay awards.

The overall funding settlement also includes investment in GP workforce and expenses. It is important to distinguish these funding streams from the annual contract uplift, and practices should review their individual funding statements to understand the financial implications.

The LMC recognises that the headline uplift does not necessarily reflect the full increase in costs faced by individual practices, including staffing, premises, utilities and other operational expenditure. Maintaining the financial viability of general practice remains a priority.

The GMS Uplift letter from the Scottish Government and a blog from SGPC regarding the uplift can be viewed [here](#).

LMC Guide- Safe, Sustainable and Viable General Practice

The Scottish General Practitioners Committee (SGPC) has now produced three complementary pieces of guidance (linked below) addressing the pressures facing Scottish general practice:

- Safe Workload Guidance for GPs in Scotland – setting out limits and actions to protect patients and clinicians where demand exceeds capacity.
- Business Guidance for GPs in Scotland – addressing practice profitability and the need to maintain a financially viable partnership model.
- Sustainable Working in General Practice – recognising the full scope of GP work and encouraging practices to organise that work within realistic and sustainable working patterns.

Taken together, these documents provide a clear framework for GP practices in determining what level of workload can safely be undertaken, what service the practice can afford to provide, and how the whole GP role should be organised.

The LMC issued a document on 1st October 2026, which seeks to bring together the three pieces of guidance from SGPC. We hope GPs will find this useful for considering for their own practice's specific circumstances.

General practice should provide the best service it can safely and sustainably deliver from the workforce and resources available. GP partners should not bridge the gap between system demand and funded capacity through unsafe workload, invisible unpaid labour or erosion of their own earnings.

Workforce Funding – Q2 Return Deadline: 23rd October 2026

Practices are reminded that the deadline for completing the Quarter 2 GP Workforce Funding return is Friday 23 October 2026. As advised by the NHSGGC GMS Contracts Team on 24th September, all four required data entry sections must be completed in accordance with the updated guidance.

Submission of a complete and accurate return by the deadline is a requirement of the associated funding. Practices should ensure that their information has been submitted successfully and retain confirmation of submission.

Any difficulties accessing or completing the return should be raised promptly with the Contracts Team.

GP IT Migration – Hosted Vision 3

The programme to migrate practices from EMIS PCS to Hosted Vision 3 is continuing across NHSGGC. The LMC remains concerned about the significant operational difficulties reported by practices following migration. These include slower clinical and administrative workflows, prescribing difficulties, excessive alerts, increased processing time and additional workload for GPs and practice staff. The wording on the [Board's public website about GP IT System Changes](#) has been updated following LMC advice.

We recognise that the impact can extend well beyond the initial migration period and that some practices continue to experience substantial disruption after going live. Practices experiencing difficulties should continue to report problems through the established migration support arrangements and use the formal escalation process where issues remain unresolved.

We strongly encourage practices to maintain a record of persistent problems, including their impact on clinical capacity, staff workload, patient care and practice operating costs. Serious patient safety concerns should also be escalated through the appropriate clinical governance and incident reporting arrangements.

The LMC continues to raise concerns about system performance, usability, the adequacy of post-migration support and the implications for patient safety and practice sustainability. Responsibility for addressing shortcomings in the supplied system must rest with the organisations responsible for its procurement, delivery and ongoing support. Practices should not be expected to absorb indefinitely the additional costs and workload arising from unresolved system problems.

We encourage colleagues to continue informing the LMC of significant or persistent difficulties so these can inform our ongoing representative work.

Employment Rights Act 2025 – Important Changes for GP Practices

The Employment Rights Act 2025 introduces substantial changes to employment law that [will affect GP practices in their role as employers](#).

Changes are being implemented in stages during 2026 and 2027. From 1st October 2026, the general time limit for bringing Employment Tribunal claims increased from three to six months, with different transitional arrangements for certain claims in Scotland.

Further measures relating to workplace sexual harassment prevention are scheduled to take effect on 30th October 2026, including strengthened employer responsibilities concerning harassment by third parties.

Practices should review their employment policies, recruitment and disciplinary procedures, harassment prevention arrangements and relevant staff training with their employment advisers. The LMC would encourage practices to seek appropriate HR or legal advice on any specific implications for their individual circumstances.

Contacting the LMC

Please use our online enquiry form at <https://www.glasgowlmc.co.uk/contact-us/>.

Do not send patient identifiable information, including names, dates of birth, addresses or CHI numbers, either in the form, emails or attachments.

Wellbeing Resources

Pressures from workload, finances and patient demand can affect the wellbeing of GPs and practice teams. A range of confidential wellbeing and financial support is available:-

National Wellbeing Hub- <https://wellbeinghub.scot/>

NHS GGC Occupational Health Service-

[Occupational Health - NHSGGC](#)

The Workforce Specialist Service-

[The Workforce Specialist Service \(WSS\) - National Wellbeing Hub](#)

BMA Wellbeing Resource-

<https://www.bma.org.uk/advice-and-support/your-wellbeing/wellbeing-support-services/sources-of-support-for-your-wellbeing>

Working Health Services Scotland

[Working Health Services Scotland \(WHSS\) - Health and Well-being \(nhsinform.scot\)](https://nhsinform.scot)

The Cameron Fund

[The Cameron Fund | The GPs' Own Charity](#)

Royal Medical Benevolent Fund

[Royal Medical Benevolent Fund - Help for Doctors in Need \(rmbf.org\)](https://rmbf.org)

Yours sincerely,

Dr Mark Fawcett
Chair

Dr John Ip
Medical Director

Dr Austin Nichol
Medical Director

Marco Florence
Policy Officer

Elaine McLaren
Administration Officer