

**Reference:** FOI.ICB-2526/397

**Subject:** Local Enhanced Services (LES) and Locally Commissioned Services (LCS)

*I can confirm that the ICB does hold some of the information requested; please see responses below:*

| QUESTION  | RESPONSE   |
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| <p>I am requesting information about Local Enhanced Services (LES) and Locally Commissioned Services (LCS) commissioned by NHS Bristol North Somerset and South Gloucestershire ICB for the current financial year (2025/26).</p> <p>Please provide the following information:</p>  |  |
| <p>1. SERVICE INVENTORY</p> <p>a) A complete list of all Local Enhanced Services (LES) and Locally Commissioned Services (LCS) currently commissioned by your ICB</p> <p>b) For each service, please provide:</p> <ul style="list-style-type: none"> <li>- Official service name</li> <li>- Whether delivered at practice level or PCN level</li> <li>- Start date of current contract</li> <li>- End date of current contract (if applicable)</li> </ul> | <p>Please refer to enclosed document - Local Enhanced Service (LES) Inventory.</p>   |
| <p>2. FINANCIAL INFORMATION</p> <p>a) Total budget allocated to LES/LCS for 2025/26</p> <p>b) Payment structure for each service (e.g., per patient, per activity, annual fee)</p> <p>c) Payment rates for each service</p>   | <p>Please refer to column G of the enclosed LES Inventory which provides the total budget allocated to each service.</p> <p>The ICB considers the information relating to the payment structure for each service commercially sensitive and has therefore applied Section 43(2) to this information.</p> |

Section 43(2) exempts from disclosure information which would, or would be likely to, prejudice the commercial interests of an organisation. The ICB considers the information relating to payment structure commercially sensitive.

Section 43(2) is a qualified exemption and therefore the public interest test has been set out below.

The public interest arguments in favour of disclosing the information include the ICB's responsibility to be transparent and accountable in its decision making. The ICB has a responsibility to demonstrate that the LES agreements represent good value for public funding.

However, disclosing the information would potentially be detrimental to primary care budgets or future service considerations. The ICB has also considered that although funded through the NHS, GP Practices are private businesses and consider information regarding their finances to be confidential information. The ICB recognises that GP Practices expect financial information to be treated as confidential and therefore disclosure of the information may damage relationships between the ICB and GP Practices.

The ICB believes that the public interest lies in maintaining the exemption as it is in the public interest for the ICB to be able to commission services at a good value to ensure that primary care services are available. Preserving good relationships with GP Practices enables the ICB to continue to deliver valuable and cost effective services to patients. If these services were not delivered

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|   | through primary care, there would be an activity increase across other local healthcare services which would impact the ability for other community and acute services to be delivered.                                    |
| <p>3. PARTICIPATION DATA</p> <p>a) Number of GP practices eligible to participate in each LES/LCS</p> <p>b) Number of PCNs participating in each LES/LCS (where applicable)</p> | Please refer to column C of the enclosed LES Inventory which details participation data.   |
| <p>4. PUBLIC INFORMATION</p> <p>a) Website links or public documents where patients can find information about LES/LCS available in their area</p>                              | Each practice is contractually required to provide their patients with information regarding the services they offer. This can be found on the practice website, notice boards or by enquiring directly with the practice. |

***The information provided in this response is accurate as of 2 March 2026 and has been approved for release by Jenny Bowker, Deputy Director of Performance Delivery, Primary Care and Children’s Services for NHS Bristol, North Somerset and South Gloucestershire ICB.***

| No | Name of BNSSG Local Enhanced Service (LES)  | Number of GP practices participating in each LES<br>(By Expression of Interest) | Contract Term                        | Level of Delivery | Payment Structure   | Annual Budget (£ '000) |
|----|---|---|--------------------------------------|-------------------|---------------------|------------------------|
| 1  | (ADHD) LES - Adult Attention Deficit Hyperactivity Disorder   | 59  | 1st July 2025 – 31st March 2027      | Practice level    | Per Activity        | 190                    |
| 2  | Anticoagulation LES - INR monitoring and vitamin K antagonist dosing – Basic and Advanced service                                   | Basic Service 69, Advanced Service 14   | 1st Jun 2024 – 31st Mar 2027         | Practice level    | Per Activity        | 202                    |
| 3  | Dementia LES  | 68  | 1st Jun 2024 – 31st May 2026         | Practice level    | Per Activity        | 403                    |
| 4  | DVT LES - Pathway for patients presenting in general practice   | 68  | 1st Jun 2024 – 31st May 2026         | Practice level    | Per Activity        | 46                     |
| 5  | Community Phlebotomy Service LES  | 70  | 1st Jun 2024 – 31st May 2026         | Practice level    | Per Activity        | 268                    |
| 6  | Specialist Medicine's Monitoring LES  | 70  | 6th Jan 2025 – 31st Mar 2027         | Practice level    | Per Activity        | 920                    |
| 7  | Supplementary Services LES  | 70  | 1st Apr 2024 - 3 + 2 years           | Practice level    | Per Activity        | 10,026                 |
| 8  | Adult Eating Disorder LES - Physical Health Monitoring for Adults with Eating Disorders   | 49  | 1st Jan 2025 - 31 Mar 2027           | Practice level    | Per Activity        | 0                      |
| 9  | Teledermatology LES   | 67  | 1st April 2025 - 31st March 2028     | Practice level    | Per Activity        | 159                    |
| 10 | Edoxaban Switch LES – (GP practices to be incentivised to switch from edoxaban to a more cost effective direct oral) anticoagulant) | 70  | 1st Jun 2025 - 31st Mar 2026         | Practice level    | Per switch          | 0                      |
| 11 | Medicines Optimisation Prescribing Quality Scheme 2025/26 - (PQS) LES   | 70  | 1st Apr 2025 - 31st Mar 2027         | Practice level    | Achievements        | 1,125                  |
| 12 | Severe Mental Illness (SMI) LES – Physical Health Checks  | 70  | 1st Apr 2025 – 31st Mar 2026         | Practice level    | Per Activity        | 190                    |
| 13 | Weight Management – Tirzepatide prescribing and management in primary care  | 65  | 23rd Jun 2025 - 22nd Jun 2026        | Practice level    | Per Activity        | 149                    |
| 14 | CMDU (COVID Medicine Delivery Unit ) LES  | 1   | Jan 2026 - To date (Ongoing Service) | Practice level    | Activity thresholds | 418                    |
| 15 | FLU Antiviral LES   | 1   | 1st Apr 2025 – 31st Mar 2028         | Practice level    | Per Activity        | 379                    |
| 16 | Female Genital Mutilation (FGM) LES   | 1   | Ongoing Service                      | Practice level    | Block               | 21                     |
| 17 | Migrant Health LES  | 7   | 1st Sep 2025 – 31st Sep 2026         | Practice level    | Per Activity        | 239                    |
| 18 | Chronic Obstructive Pulmonary Disease (COPD) LES  | 12  | Feb 2026 - 31st Mar 2030             | Practice level    | Per Activity        | 0                      |