

UMAPs Interim Update for NHS Employers on the Leng Review and 16 July Decision

4th September, 2025

Overview

On 16th July 2025, NHS England, following directives from DHSC and the Secretary of State, issued a decision calling for “immediate action” to implement recommendations from the Leng Review. Many NHS employers interpreted this decision as mandatory, resulting in widespread concern:

- Employers felt compelled to implement recommendations even where they disagreed.
- Some employers were concerned that immediate implementation could compromise patient care, potentially affecting access to healthcare.
- Many were unclear on the practical mechanics of implementation and the legal exposure to employment tribunal claims.

This confusion triggered a 675% increase in employer disputes, risking employment tribunal cases, and significant operational and patient safety concerns.

UMAPs Intervention and Wins

UMAPs acted swiftly to address these risks:

1. **Blocking proposed DES amendments** – On 30th July 2025, UMAPs successfully prevented NHSE from introducing changes to Associate titles and scopes of practice.
2. **Urgent legal action** – On 11th August 2025, UMAPs filed an application for an interim injunction requiring NHS England and DHSC to clarify that the 16th July decision is **not mandatory**.

Whilst the injunction itself was not granted, the legal action resulted in NHS England and the DHSC explicitly acknowledging in court that:

- **DHSC:** *“We are not saying it is safer to see a resident doctor than a PA. We are not saying any medical professional is completely safe all the time.”*
- **NHS England:** *“Employers, including NHS trusts, PCNs, and GP practices, are independent and make clinician-led decisions regarding their workforce, considering local circumstances and clinical practice.”*
- **Dr Claire Fuller (in her witness statement for NHS England):** *“It is ultimately a decision for the professional judgment of employers (not NHS England) ... to determine the skillset and competencies of their workforce having regard to external guidance sources.”*

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Key Implications for Employers

- Therefore, NHSE has stated that **the 16th July decision is not a directive**. On 15th August 2025, UMAPs' application for an interim injunction was heard by the Administrative Court. Whilst the injunction itself was not granted, on the very same day, NHS England revised the original guidance on its [website](#), replacing the call for "immediate action" with FAQs that unequivocally clarify that employers retain full discretion over whether and how to implement the recommendations.
- Employers are responsible for any implementation decisions, including legal and Human Rights consequences.
- Immediate or unconsidered changes risk breaching employment law, potentially exposing employers to tribunal claims. Specifically:
 - Termination under "**Some Other Significant Reason (SOSR)**" or redundancy must be considered carefully. Employers relying on these measures to implement the recommendations will still face legal challenge.
- The ongoing judicial review challenges both the process and legality of the Leng Review recommendations. UMAPs has now also added Prof. Leng as a defendant, challenging the recommendations themselves.

UMAPs Guidance and Perspective

Whilst UMAPs would not mandate instructions to employers, our view and guidance is as follows:

- **Scope of practice:** Associates should be able to practice within the scope permitted by the GMC, in line with their regulation. This aligns with the '**UMAPs and CMAPs Base Scope of Practice**' document available on the UMAPs website.
- **Supervision and support:** Employers seeking guidance on supervising MAPs may reference:
 - [CQC "Myth Buster" guidance](#)
 - [GMC supervision guidance](#)
 - MAP Employer Guidelines for [Primary Care](#) or [Secondary Care](#)

These references can support employers in making considered, compliant decisions whilst the judicial review is pending.

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Recommended Approach for Employers

Until the judicial review concludes:

1. **Pause major changes** – Avoid hasty implementation of permanent or restrictive measures that could expose employers to legal claims.
2. **Maintain the status quo** – Where operational adjustments are necessary, they should be temporary, proportionate, and fully compliant with all applicable laws and procedures.
3. **Consult thoroughly** – Engage with local trade unions and ensure decisions are evidence-based, non-predetermined, and compliant with employment law.
4. **Consider clinical competence** – Decisions should be guided by the qualifications, skillset, and safety record of Associates, in line with GMC and CQC guidance.

Summary

- NHSE has stated that the 16th of July decision is not mandatory, and the NHS England website has since been updated. Employers have discretion over workforce implementation.
- Acting precipitously risks legal exposure, including employment tribunal claims.
- UMAPs strongly recommends pausing any significant changes until after the judicial review outcome.
- NHS Resolutions has confirmed there are NO changes to indemnity coverage for Associates based on working inside or outside of Leng Recommendations.
- Employers seeking guidance can contact the UMAPs team for updates and support.
- UMAPs remains committed to protecting both NHS Associates and employers, whilst safeguarding patient access to care.