

Schedules

Schedule 1

Regulation 3

Amendments to the National Health Service (General Medical Services Contracts) Regulations 2015

Digital practice area map

- 1.—(1) In regulation 3(1) (interpretation), in the appropriate place insert—
- ““digital practice area map” means a map of the practice area produced on digital tools provided by NHS England;”.
- (2) In regulation 77 (annual return and review)—
- (a) at the end of paragraph (1) insert “and make available to NHS England a digital practice area map”;
- (b) in paragraph (3), after “the completed return” insert “and make available the digital practice area map”.
- (3) In Schedule 3 (other contractual terms), in sub-paragraph 48(i) (information to be included in practice leaflets) for the words “a sketch diagram” until the end of that sub-paragraph substitute “an image of the practice area, a written description of the practice area or a digital practice area map”.

Performers List requirements

- 2.—(1) For regulation 40 (qualifications of performers: medical practitioners) (but not the heading) substitute—
- “**40.** A medical practitioner may only perform a clinical service under the contract where that medical practitioner is not—
- (a) prohibited from performing any such service by regulation 24 of the National Health Service (Performers Lists) (England) Regulations 2013⁽¹⁾;
- (b) suspended from the medical performers list or from the Medical Register; and
- (c) subject to interim suspension under section 41A of the Medical Act 1983⁽²⁾.”.
- (2) In regulation 44 (conditions for employment and engagement: medical practitioners)—
- (a) for paragraph (1), substitute—
- “(1) Subject to paragraph (2), a contractor may not employ or engage a medical practitioner unless the contractor has checked that the practitioner meets the requirements of—
- (a) regulation 40; and
- (b) regulation 43.”;
- (b) omit paragraph (3).

(1) S.I. 2013/335.

(2) 1983 c. 54; relevant amending instruments are S.I. 2000/1803, 2002/3135, 2006/1914 and 2015/794.

Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.

Vaccines and immunisations standards

3. In regulation 66B (vaccines and immunisations: appointments)—
- (a) for the heading substitute “Vaccines and immunisations: standards”;
 - (b) after paragraph (1) insert—
 - “(1A) A contractor must comply with the standards contained in the Vaccines and Immunisations Standards on the processing of data relating to patients.”;
 - (c) in paragraph (2)—
 - (i) in the appropriate place insert—
 - ““processing” has the meaning given by section 3(4) of the Data Protection Act 2018(3);”;
 - (ii) for the definition of “relevant vaccine or immunisation” substitute “has the same meaning as in regulation 66A(1)(a) of these Regulations;”;
 - (iii) in the definition of “the Vaccines and Immunisations Standards”—
 - (aa) after “determined by NHS England” insert “published on 15th April 2024(4)“;
 - (bb) after sub-paragraph (f) insert—
 - “(g) the processing of records relating to patient vaccinations and immunisations, including records relating to the administration of vaccines and patient vaccination status.”.

Guidelines for GP electronic patient records

4. In regulation 67(3)(c) (patient records), for the words “The Good Practice Guidelines” until the end of that sub-paragraph substitute ““Digital Primary Care: Good Practice Guidelines for GP electronic patient records – (GPGv5)”(5), published on 20th September 2023”.

Workforce data

5. In regulation 74E (NHS England Workforce Collection)—
- (a) for paragraph (2) substitute—
 - “(2) The data referred to in paragraph (1) must be—
 - (a) appropriately coded, reviewed and updated by the contractor in line with agreed standards set out in guidance published by NHS England;
 - (b) submitted to NHS England—
 - (i) using the data entry module on the National Workforce Reporting Service(6), which is a facility provided by NHS England to the contractor for this purpose; and
 - (ii) at such intervals during the financial year as are notified to the contractor by NHS England.”;

(3) 2018 c. 12. There are amendments to section 3, but none are relevant.

(4) Available online at: <https://www.england.nhs.uk/long-read/general-practice-vaccination-and-immunisation-services-standards-and-core-contractual-requirements/>. Hard copies are available from NHS England, Wellington House, 133-155 Wellington Road, London SE1 8UG.

(5) These guidelines are available online at: <https://www.england.nhs.uk/digital-gp-good-practice-guidance/>. Hard copies are available from NHS England, Wellington House, 133-155 Wellington Road, London SE1 8UG.

(6) Available online at: <https://digital.nhs.uk/data-and-information/areas-of-interest/workforce/national-workforce-reporting-service-nwrs>. Hard copies are available from NHS England, Wellington House, 133-155 Wellington Road, London SE1 8UG.

- (b) omit paragraph (3).

Determination of disputes

6. In regulation 84(2)(b) (determination of the dispute), for “section 9(5)” substitute “section 90(5)(7)”.

Telephone contract data

7. In Schedule 3 (other contractual terms)—

(a) in paragraph 2 (telephone services)—

(i) in sub-paragraph (1) after “telephone services” insert “(“relevant telephone services”);”;

(ii) after sub-paragraph (2) insert—

“(3) The contractor must ensure that any new contract or other arrangement relating to relevant telephone services is procured under the Advanced Telephony Better Purchasing Framework(8).

(4) Where NHS England requires, the contractor must make available to NHS England, within such reasonable time frame as specified by NHS England, such information as specified by NHS England that is available to the contractor in relation to the handling of calls under relevant telephone services.”;

(b) omit paragraph 2A (new telephone contract or arrangement).

Continuity of care

8. In Schedule 3, in paragraph 4 (contact with the practice)—

(a) in sub-paragraph (2)(a) omit “, and the patient’s health would not thereby be jeopardised”;

(b) in sub-paragraph (4)—

(i) in sub-paragraph (a) omit “and” and at the end of that sub-paragraph insert “, including the need to avoid jeopardising the patient’s health”;

(ii) at the end of sub-paragraph (b) insert “; and”;

(iii) after sub-paragraph (b) insert—

“(c) any benefits to the patient of providing for continuity of the health care professional involved in their care and treatment.”.

Duty to have regard to Armed Forces Covenant principles

9. In Schedule 3, after paragraph 15A (duty of co-operation: Primary Care Networks) insert—

“Duty to have regard to Armed Forces Covenant principles

15B. When providing services under the contract, the contractor must have due regard to the principles contained in section 343AA(1)(a) to (c) of the Armed Forces Act 2006(9) in relation to its patients and prospective patients.”.

(7) Section 90(5) was amended by paragraph 52 of Schedule 9 to the Crime and Courts Act 2013 (c. 22).

(8) <https://digital.nhs.uk/services/digital-services-for-integrated-care/advanced-telephony-better-purchasing-framework/buyers-guide>. Hard copies are available from NHS England, Wellington House, 133-155 Wellington Road, London SE1 8UG.

(9) 2006 c. 52. Section 343AA was inserted by sections 8(1) and (3) of the Armed Forces Act 2021 (c. 35).

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Applications for patient registration

10. In Schedule 3, for paragraph 18(3) (application for inclusion in a list of patients) substitute—

“(3) Subject to sub-paragraph (4), the contractor may only accept an application for inclusion in that list if it is—

- (a) an application on a form specified to the contractor by NHS England; or
- (b) an application through the online registration service supplied to the contractor by NHS England.

(3A) The contractor must make available both application methods referred to in sub-paragraph (3).”.