
STATUTORY INSTRUMENTS

2016 No. 875

NATIONAL HEALTH SERVICE, ENGLAND

The National Health Service (General Medical Services Contracts and Personal Medical Services Agreements) (Amendment) Regulations 2016

Made - - - - *5th September 2016*
Laid before Parliament *9th September 2016*
Coming into force - - *3rd October 2016*

The Secretary of State, in exercise of the powers conferred by sections 89(1) and (2)(a), 94(1) and (3) (d) and 272(7) and (8) of the National Health Service Act 2006(1), makes the following Regulations.

PART 1

General

Citation, commencement and interpretation

1.—(1) These Regulations may be cited as the National Health Service (General Medical Services Contracts and Personal Medical Services Agreements) (Amendment) Regulations 2016.

(2) They come into force on 3rd October 2016.

(3) In these Regulations—

“the GMS Contracts Regulations” means the National Health Service (General Medical Services Contracts) Regulations 2015(2); and

“the PMS Agreements Regulations” means the National Health Service (Personal Medical Services Agreements) Regulations 2015(3).

(1) [2006 c. 41](#). The National Health Service Act 2006 (“the Act”) was amended by the Health and Social Care Act 2012 ([c. 7](#)) and relevant amendments to section 89 were made by section 202(2) and paragraph 34 of Schedule 4, and to section 94 by paragraph 38 of Schedule 4. *See* section 275(1) of the Act for the meaning given to “prescribed” and “regulations”. The powers exercised in making these Regulations are exercisable by the Secretary of State in relation to England only, by virtue of section 271(1) of the Act.

(2) [S.I. 2015/1862](#), as amended by [S.I. 2016/696](#).

(3) [S.I. 2015/1879](#), as amended by [S.I. 2016/696](#).

PART 2

Amendment of the GMS Contracts Regulations

Amendment of regulation 67 of the GMS Contracts Regulations

2. In regulation 67 of the GMS Contracts Regulations (patient records)—

(a) for paragraph (5) substitute—

“(5) Where a patient on the contractor’s list of patients dies, the contractor must send the complete records relating to that patient to the Board—

- (a) in a case where the contractor was informed by the Board of that patient’s death, before the end of the period of 14 days beginning with the date on which the contractor was so informed; or
- (b) in any other case, before the end of the period of one month beginning with the date on which the contractor learned of that patient’s death.

(5A) Where a patient on a contractor’s list of patients has registered with another provider of primary medical services and the contractor receives a request from that provider for the complete records relating to that patient, the contractor must send to the Board—

- (a) the complete records, or any part of the records, sent via the GP2GP facility in accordance with regulation 69 for which the contractor does not receive confirmation of safe and effective transfer via that facility; and
- (b) any part of the records held by the contractor only in paper form.

(5B) Where a patient on a contractor’s list of patients—

- (a) is removed from that list at that patient’s request under paragraph 23 of Schedule 3, or by reason of the application of any of paragraphs 24 to 31 of that Schedule; and
- (b) the contractor has not received a request from another provider of medical services with which that patient has registered for the transfer of the complete records relating to that patient,

the contractor must send a copy of those records to the Board.

(5C) Where a contractor’s responsibility for a patient terminates in accordance with paragraph 32 of Schedule 3, the contractor must send any records relating to that patient that it holds to—

- (a) if known, the provider of primary medical services with which that patient is registered; or
- (b) in all other cases, the Board.

(5D) For the purposes of this regulation, “GP2GP facility” has the same meaning as in paragraph (2) of regulation 69.”;

- (b) omit paragraph (6); and
- (c) omit paragraph (7).

Amendment of regulation 68 of the GMS Contracts Regulations

3. In regulation 68 of the GMS Contracts Regulations (Summary Care Record), in paragraph (1) for “at least on a daily basis” substitute “when the change occurs”.

Insertion of new regulation 74A into the GMS Contracts Regulations

4. After regulation 74 of the GMS Contracts Regulations (provision of information), insert—

“Provision of information: GP access data

74A.—(1) Subject to paragraph (4), a contractor must collect such information relating to patient access to primary medical services at the contractor’s practice (“GP access data”) as the Board may reasonably require for the purposes of, or in connection with, the contract.

(2) The contractor must submit an online return to the Board in respect of any GP access data collected by it using the Primary Care Web Tool (“PCWT”) facility⁽⁴⁾ which is provided by the Board to the contractor for this purpose.

(3) The contractor must submit an online return of GP access data to the Board twice in every financial year—

- (a) by 31st October 2016 and 31st March 2017 in respect of the financial year that ends on 31st March 2017; and
- (b) by 30th September and 31st March respectively for each subsequent financial year until 31st March 2021.

(4) The requirements of this regulation do not apply where the contractor does not have access to computer systems and software which would enable it to use the PCWT facility to submit an online return of GP access data to the Board.”.

PART 3

Amendment of the PMS Agreements Regulations

Amendments of regulation 60 of the PMS Agreements Regulations

5. In regulation 60 of the PMS Agreements Regulations (patient records)—

- (a) for paragraph (6) substitute—

“(6) Where a patient on the contractor’s list of patients dies, the contractor must send the complete records relating to that patient to the Board—

- (a) in a case where the contractor was informed by the Board of that patient’s death, before the end of the period of 14 days beginning with the date on which the contractor was so informed; or
- (b) in any other case, before the end of the period of one month beginning with the date on which the contractor learned of that patient’s death.

(6A) Where a patient on a contractor’s list of patients has registered with another provider of primary medical services and the contractor receives a request from that provider for the complete records relating to that patient, the contractor must send to the Board—

- (a) the complete records, or any part of the records, sent via the GP2GP facility in accordance with regulation 62 for which the contractor does not receive confirmation of safe and effective transfer via that facility; and
- (b) any part of the records held by the contractor only in paper form.

(6B) Where a patient on a contractor’s list of patients—

⁽⁴⁾ The “PCWT facility” is the approved internet webtool made available by NHS England to contractors for the purposes of submitting GP access data online.

- (a) is removed from that list at that patient's request under paragraph 22 of Schedule 2, or by reason of the application of any of paragraphs 23 to 30 of that Schedule; and
- (b) the contractor has not received a request from another provider of medical services with which that patient has registered for the transfer of the complete records relating to that patient,

the contractor must send a copy of those records to the Board.

(6C) Where a contractor's responsibility for a patient terminates in accordance with paragraph 31 of Schedule 2, the contractor must send any records relating to that patient that it holds to—

- (a) if known, the provider of primary medical services with which that patient is registered; or
- (b) in all other cases, the Board.

(6D) For the purposes of this regulation, "GP2GP facility" has the same meaning as in paragraph (2) of regulation 62.;"

- (b) omit paragraph (7); and
- (c) omit paragraph (8).

Amendment of regulation 61 of the PMS Agreements Regulations

6. In regulation 61 of the PMS Agreements Regulations (Summary Care Record), in paragraph (1) for "at least on a daily basis" substitute "when the change occurs".

Insertion of new regulation 67A into the PMS Agreements Regulations

7. After regulation 67 of the PMS Agreements Regulations (provision of information) insert—

"Provision of information: GP access data

67A.—(1) Subject to paragraph (4), a contractor must collect such information relating to patient access to primary medical services at the contractor's practice ("GP access data") as the Board may reasonably require for the purposes of, or in connection with, the contract.

(2) The contractor must submit an online return to the Board in respect of any GP access data collected by it using the Primary Care Web Tool ("PCWT") facility⁽⁵⁾ which is provided by the Board to the contractor for this purpose.

(3) The contractor must submit an online return of GP access data to the Board twice in every financial year—

- (a) by 31st October 2016 and 31st March 2017 in respect of the financial year that ends on 31st March 2017; and
- (b) by 30th September and 31st March respectively for each subsequent financial year until 31st March 2021.

(4) The requirements of this regulation do not apply where the contractor does not have access to computer systems and software which would enable it to use the PCWT facility to submit an online return of GP access data to the Board."

(5) The "PCWT facility" is the approved internet webtool made available by NHS England to contractors for the purposes of submitting GP access data online.

Signed by authority of the Secretary of State for Health.

5th September 2016

David Mowat
Parliamentary Under-Secretary of State,
Department of Health

EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations amend the National Health Service (General Medical Services Contracts) Regulations 2015 (S.I. 2015/1862) (“the GMS Contracts Regulations”) and the National Health Service (Personal Medical Services Agreements) Regulations 2015 (S.I. 2015/1879) (“the PMS Agreements Regulations”) which make provision in respect of the services provided under a general medical services contract and a personal medical services agreement made pursuant to Part 4 of the National Health Service Act 2006 (primary medical services). They apply to England only.

Part 2 of the Regulations amends the GMS Contracts Regulations.

Regulation 2 reduces the circumstances in which a provider of primary medical services must send a patient’s medical records to the National Health Service Commissioning Board (“the Board”) under regulation 67. It provides that where a patient dies or is removed from the contractor’s list of patients without registering with another provider of primary medical services, that patient’s medical records must be sent to the Board. Where a patient registers with another provider of primary medical services, that patient’s medical records need only be sent to the Board if and to the extent that they are in paper form or if there is a technical error in the electronic transfer of those records, rather than in all cases as is currently required. Where a contractor terminates responsibility for providing services to a patient not on its list, it must send any records held in relation to that patient to the new provider, if it knows who that is, or otherwise must send the patient’s records to the Board .

Regulation 3 amends regulation 68 to provide that a patient’s Summary Care Record must be updated as changes occur, rather than on a daily basis.

Regulation 4 inserts a new regulation 74A to introduce a requirement for contractors with the appropriate computer systems to collect and submit to the Board such information about patient access to primary medical services as the Board may require.

Part 3 of the Regulations makes amendments to the PMS Agreements Regulations which are similar in nature to those made to the GMS Contracts Regulations by regulations 2 to 4 in Part 1.