
STATUTORY INSTRUMENTS

2020 No. 226

NATIONAL HEALTH SERVICE, ENGLAND

The National Health Service (General Medical Services Contracts and Personal Medical Services Agreements) (Amendment) Regulations 2020

<i>Made</i>	- - - -	<i>5th March 2020</i>
<i>Laid before Parliament</i>		<i>6th March 2020</i>
<i>Coming into force</i>	- -	<i>1st April 2020</i>

The Secretary of State for Health and Social Care makes the following Regulations in exercise of the powers conferred by sections 85(1), 89(1) and (2)(a), 94(1) and 272(7) and (8) of the National Health Service Act 2006(1).

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 2020.

(2) These Regulations come into force on 1st April 2020.

(3) In these Regulations—

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

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

Amendment of the GMS Contracts Regulations

2. Schedule 1 contains amendments to the GMS Contracts Regulations.

Amendment of the PMS Agreements Regulations

3. Schedule 2 contains amendments to the PMS Agreements Regulations.

(1) [2006 c. 41](#). There are amendments to sections 89, 94 and 272 of the 2006 Act which are not relevant to these Regulations. For the meaning of “prescribed” and “regulations” see section 275(1) of the 2006 Act.
(2) [S.I. 2015/1862](#).
(3) [S.I. 2015/1879](#).

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Signed by the authority of the Secretary of State for Health and Social Care.

5th March 2020

Jo Churchill
Parliamentary Under-Secretary of State,
Department of Health and Social Care

SCHEDULE 1

Regulation 2

Amendments to the GMS Contracts Regulations

General

1. The GMS Contracts Regulations are amended as follows.

Maternal postnatal consultation

- 2.—(1) Regulation 17(4) is amended as follows.
 - (2) In paragraph (1), for “and (9)” substitute “, (9) and (12)”.
 - (3) After paragraph (11), insert—
 - “(12) A contractor must—
 - (a) invite each of its female patients who delivers a baby to attend a postnatal maternal consultation, and
 - (b) where the invitation is accepted, provide the patient with such a consultation.
 - (13) A maternal postnatal consultation must, if possible, be provided during the period which—
 - (a) begins six weeks after the conclusion of the delivery of the baby, and
 - (b) ends—
 - (i) eight weeks after conclusion of the delivery, or
 - (ii) if the patient has not been discharged from secondary care services before the end of the period mentioned in paragraph (i), eight weeks after the patient’s discharge from those services.
 - (14) A maternal postnatal consultation must not be provided at the same time as any consultation at which the physical health of the baby is reviewed (if relevant).
 - (15) In this regulation, “maternal postnatal consultation” means a consultation with a general medical practitioner at which the physical and mental health and well-being of the patient is reviewed.”.

Electronic repeat dispensing

- 3.—(1) Regulation 60A(5) is amended as follows.
 - (2) For the heading substitute, “Prescribing for electronic repeat dispensing”.
 - (3) In paragraph (1), for “electronic repeat dispensing services” substitute “electronic repeat dispensing”.
 - (4) For paragraph (2) substitute—
 - “(2) In this regulation, “electronic repeat dispensing” means dispensing as part of pharmaceutical services or local pharmaceutical services which involves the provision of drugs, medicines or appliances in accordance with an electronic repeatable prescription.”.

Restriction on use of fax machines

4. After regulation 70 insert—

(4) There are amendments to regulation 17 which are not relevant to these Regulations.
(5) Regulation 60A was inserted by [S.I. 2019/1137](#).

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“Use of fax machines

70A.—(1) Where a contractor can transmit information by electronic means (other than facsimile transmission) securely and directly to a relevant person, the contractor must not—

- (a) transmit any information to that person by facsimile transmission, or
- (b) agree to receive any information from that person by facsimile transmission.

(2) Paragraph (1) does not apply to any information which relates solely to the provision of clinical services or treatment to a patient under a private arrangement.

(3) In this regulation, “relevant person” means—

- (a) an NHS body⁽⁶⁾,
- (b) another health service provider,
- (c) a patient, or
- (d) a person acting on behalf of a patient.”.

Patient access to online services

5. After regulation 71, insert—

“Patient online services: provision of online access to coded information in medical record and prospective medical record

71ZA.—(1) Where a contractor holds the medical record of a registered patient (“P”) on its computerised clinical systems, the contractor must promote and offer to P the facility to access online the information from P’s medical record which is held in coded form other than—

- (a) any excepted information, or
- (b) any information which the contractor’s computerised clinical systems cannot separate from any free-text entry in P’s medical record.

(2) The contractor must, if its computerised clinical systems and redaction software allow, offer to P the facility to access online the information (other than any excepted information) entered onto P’s medical record on or after the relevant date (the “prospective medical record”).

(3) If P accepts an offer made under paragraph (2), the contractor must, as soon as possible, provide P with the facility to access online P’s prospective medical record.

(4) But the contractor may—

- (a) delay providing the facility to P, if the contractor considers that providing P with it is likely to have an adverse impact on its provision of essential services;
- (b) delay giving P online access to any information added to P’s prospective medical record after the facility is provided to P, if the contractor considers that providing P with access to that information is likely to have an adverse impact on its provision of essential services.

(5) If the contractor decides to delay providing P with access to the facility or giving P access to any information, it must notify P—

- (a) of that decision (including the period for which it anticipates access will be delayed), and

⁽⁶⁾ See the definition of “NHS body” in section 275(1) of the National Health Service Act 2006. The definition was added by the Health and Social Care Act 2012, Schedule 4, paragraph 138.

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(b) when the facility, or that information, becomes available.

(6) In this regulation, “relevant date” means—

(a) 1st April 2020, where P became a registered patient before 1st October 2019;

(b) in any other case, 1st October 2019.

(7) For the purposes of this regulation and regulation 71ZB, information is “excepted information” if the contractor would not be required to disclose it to P in response to a request made by P in exercise of a right under Article 15 of the GDPR.

(8) For the purposes of paragraph (7), “GDPR” has the meaning given in section 3(10) of the Data Protection Act 2018(7).

Patient online services: provision of online access to full digital medical record

71ZB.—(1) A contractor must provide a registered patient (“P”) with the facility to access online relevant medical information if—

(a) its computerised clinical systems and redaction software allow it to do so, and

(b) P requests, in writing, that it provide that facility.

(2) In this regulation “relevant medical information” means any information entered on P’s medical record other than—

(a) any information which P can access online via a facility offered in accordance with regulation 71ZA(1) or (2), or

(b) any excepted information.”.

Online presence and profile on NHS website

6. For regulation 73, substitute—

“Requirement to have and maintain an online presence

73.—(1) A contractor must have—

(a) a practice website, or

(b) an online practice profile.

(2) The contractor must publish on its practice website or profile (as the case may be) all the information which is required to be included in its practice leaflet(8).

(3) The contractor must publish that information otherwise than by making its practice leaflet available for viewing or downloading.

(4) The contractor must review the information available on its practice website or profile at least once in every period of 12 months.

(5) The contractor must make any amendments necessary to maintain the accuracy of the information on its website or profile following—

(a) a review under paragraph (4);

(b) a change to—

(i) the address of any of the contractor’s practice premises,

(ii) the contractor’s telephone number,

(7) 2018 c. 12. Section 3(10) is amended, with effect from IP completion day, by S.I. 2019/419. “IP completion day” has the meaning given in section 39(1) of the European Union (Withdrawal Agreement) Act 2020 (c. 1).

(8) “Practice leaflet” is defined in regulation 3 of the Regulations.

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- (iii) the contractor’s electronic-mail address (if made available on its website or profile), or
 - (iv) any other stated means by which a patient may contact the contractor to book or amend an appointment, or to order repeat prescriptions for drugs, medicines or appliances.
- (6) The requirements in this regulation are in addition to those in regulation 27 and paragraph 8(8) of Schedule 3.
- (7) In these Regulations, “online practice profile” means a profile—
- (a) which is on a website (other than the NHS website⁽⁹⁾), or an online platform, provided by another person for use by the contractor, and
 - (b) through which the contractor advertises the primary medical services it provides.

Requirement to maintain profile page on NHS website

73A.—(1) A contractor must review the information available on its profile page on the NHS website at least once in every period of 12 months.

(2) The contractor must make any amendments necessary to maintain the accuracy of the information on its profile page following—

- (a) a review under paragraph (1);
- (b) a change to—
 - (i) the address of any of the contractor’s practice premises,
 - (ii) the contractor’s telephone number,
 - (iii) the contractor’s electronic-mail address (if made available on its profile page), or
 - (iv) any other stated means by which a patient may contact the contractor to book or amend an appointment, or to order repeat prescriptions for drugs, medicines or appliances.”.

Minor and consequential amendments

7. In regulation 3(**10**)—

- (a) after the definition of “Nursing and Midwifery Register”, insert—

““online practice profile” has the meaning given in regulation 73(7);”;
- (b) in the definition of “practice website”, for “any” substitute “a”.

8. In regulation 27, in paragraph (1), for “(if it has one)” substitute “or online practice profile”.

9.—(1) Regulation 71(**11**) is amended as follows.

- (2) In the heading, after “services” insert “: appointments and prescriptions”.
- (3) Omit paragraphs (5) and (5A).
- (4) In paragraph (8)—
 - (a) omit “Where the contractor has a practice website”;
 - (b) for “that practice website” substitute “its practice website or online practice profile”.

⁽⁹⁾ The NHS website is available at: <https://www.nhs.uk/>.

⁽¹⁰⁾ The definition of “practice website” was inserted by S.I. 2019/1137.

⁽¹¹⁾ Relevant amending instrument is S.I. 2019/1137.

- (5) In paragraph (9), omit the definition of “newly registered patient”.
10. In regulation 71A(12), after “regulation 71” insert “or regulation 71ZA(1) or (2)”.
11. In regulation 74F(13)—
- (a) in paragraph (3), for sub-paragraph (a), substitute—
 - “(a) electronically at nhsdigital.costrecovery@nhs.net”;
 - (b) in paragraph (4)—
 - (i) in the words before sub-paragraph (a), for “Department for Work and Pensions” substitute “the NHS Business Services Authority”;
 - (ii) for sub-paragraphs (a) and (b), substitute—
 - “(a) electronically to nhsbsa.faregistrations@nhs.net, or
 - (b) by post in hard copy form to Cost Recovery, Overseas Healthcare Service, Bridge House, 152 Pilgrim Street, Newcastle Upon Tyne, NE1 6SN.”.
12. In Schedule 1, in paragraph 6(2)(b), for “fourth edition of “Health for all Children”” substitute “fifth edition of “Health for all Children””(14).
- 13.—(1) Schedule 3 is amended as follows.
- (2) In paragraph 8—
- (a) in sub-paragraph (8)—
 - (i) in the words before paragraph (a), omit “, by no later than 31st March 2016,”;
 - (ii) in paragraph (a), for “(if it has one)” substitute “or online practice profile”;
 - (b) omit sub-paragraph (9).
- (3) In paragraph 48, in sub-paragraph (c), for “(if any)” substitute “or the address at which its online practice profile is available”.

SCHEDULE 2

Regulation 3

Amendments to the PMS Agreements Regulations

General

1. The PMS Agreements Regulations are amended as follows.

Electronic repeat dispensing

- 2.—(1) Regulation 53A(15) is amended as follows.
- (2) For the heading substitute, “Prescribing for electronic repeat dispensing”.
- (3) In paragraph (1), for “electronic repeat dispensing services” substitute “electronic repeat dispensing”.

(12) Regulation 71A was inserted by [S.I. 2018/844](#).

(13) Regulation 74F was inserted by [S.I. 2017/908](#).

(14) “Health for all Children” revised fifth edition by Alan Emond was published by Oxford University Press on 28th February 2019.

(15) Regulation 53A was inserted by [S.I. 2019/1137](#).

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(4) For paragraph (2) substitute—

“(2) In this regulation, “electronic repeat dispensing” means dispensing as part of pharmaceutical services or local pharmaceutical services which involves the provision of drugs, medicines or appliances accordance with an electronic repeatable prescription.”.

Restriction on use of fax machines

3. After regulation 63, insert—

“Use of fax machines

63A.—(1) Where a contractor can transmit information by electronic means (other than facsimile transmission) securely and directly to a relevant person, the contractor must not—

- (a) transmit any information to that person by facsimile transmission, or
- (b) agree to receive any information from that person by facsimile transmission.

(2) Paragraph (1) does not apply to any information which relates solely to the provision of clinical services or treatment to a patient under a private arrangement.

(3) In this regulation, “relevant person” means—

- (a) an NHS body,
- (b) another health service provider,
- (c) a patient, or
- (d) a person acting on behalf of a patient.”.

Patient access to online services

4. After regulation 64, insert—

“Patient online services: provision of online access to coded information in medical record and prospective medical record

64ZA.—(1) Where a contractor holds the medical record of a registered patient (“P”) on its computerised clinical systems, the contractor must promote and offer to P the facility to access online the information from P’s medical record which is held in coded form other than—

- (a) any excepted information, or
- (b) any information which the contractor’s computerised clinical systems cannot separate from any free-text entry in P’s medical record.

(2) The contractor must, if its computerised clinical systems and redaction software allow, offer to P the facility to access online the information (other than any excepted information) entered onto P’s medical record on or after the relevant date (the “prospective medical record”).

(3) If P accepts an offer made under paragraph (2), the contractor must, as soon as possible, provide P with the facility to access online P’s prospective medical record.

(4) But the contractor may—

- (a) delay providing the facility to P, if the contractor considers that providing P with it is likely to have an adverse impact on its provision of essential services;
- (b) delay giving P online access to any information added to P’s prospective medical record after the facility is provided to P, if the contractor considers that providing P

with access to that information is likely to have an adverse impact on its provision of essential services.

(5) If the contractor decides to delay providing P with access to the facility or giving P access to any information, it must notify P—

- (a) of that decision (including the period for which it anticipates access will be delayed), and
- (b) when the facility, or that information, becomes available.

(6) In this regulation, “relevant date” means—

- (a) 1st April 2020, where P became a registered patient before 1st October 2019;
- (b) in any other case, 1st October 2019.

(7) For the purposes of this regulation and regulation 64ZB, information is “excepted information” if the contractor would not be required to disclose it to P in response to a request made by P in exercise of a right under Article 15 of the GDPR.

(8) For the purposes of paragraph (7), “GDPR” has the meaning given in section 3(10) of the Data Protection Act 2018.

Patient online services: provision of online access to full digital medical record

64ZB.—(1) A contractor must provide a registered patient (“P”) with the facility to access online relevant medical information if—

- (a) its computerised clinical systems and redaction software allow it to do so, and
- (b) P requests, in writing, that it provide that facility.

(2) In this regulation “relevant medical information” means any information entered on P’s medical record other than—

- (a) any information which P can access online via a facility offered in accordance with regulation 64ZA(1) or (2), or
- (b) any excepted information.”.

Practice website and profile on NHS website

5. For regulation 66 substitute—

“Requirement to have and maintain an online presence

66.—(1) A contractor must have—

- (a) a practice website, or
- (b) an online practice profile.

(2) The contractor must publish on its practice website or profile (as the case may be) all the information which is required to be included in its practice leaflet⁽¹⁶⁾.

(3) The contractor must publish that information otherwise than by making its practice leaflet available for viewing or downloading.

(4) The contractor must review the information available on its practice website or profile at least once in every period of 12 months.

(5) The contractor must make any amendments necessary to maintain the accuracy of the information on its website or profile following—

(16) “Practice leaflet” is defined in regulation 3 of the Regulations.

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- (a) a review under paragraph (4);
 - (b) a change to—
 - (i) the address of any of the contractor’s practice premises,
 - (ii) the contractor’s telephone number,
 - (iii) the contractor’s electronic-mail address (if made available on its website or profile), or
 - (iv) any other stated means by which a patient may contact the contractor to book or amend an appointment, or to order repeat prescriptions for drugs, medicines or appliances.
- (6) The requirements in this regulation are in addition to those in regulation 21 and paragraph 15(8) of Schedule 2.
- (7) In these Regulations, “online practice profile” means a profile—
- (a) which is on a website (other than the NHS website⁽¹⁷⁾), or an online platform, provided by another person for use by a contractor, and
 - (b) through which the contractor advertises the primary medical services it provides.

Requirement to maintain profile page on NHS website

66A.—(1) A contractor must review the information available on its profile page on the NHS website at least once in every period of 12 months.

(2) The contractor must make any amendments necessary to maintain the accuracy of the information its profile page following—

- (a) a review under paragraph (1);
- (b) a change to—
 - (i) the address of any of the contractor’s practice premises,
 - (ii) the contractor’s telephone number,
 - (iii) the contractor’s electronic-mail address (if made available on its profile page), or
 - (iv) any other stated means by which a patient may contact the contractor to book or amend an appointment, or to order repeat prescriptions for drugs, medicines or appliances.”.

Minor and consequential amendments

6. In regulation 3⁽¹⁸⁾—

- (a) after the definition of “Nursing and Midwifery Register”, insert—

““online practice profile” has the meaning given in regulation 66(7);”;
- (b) in the definition of “practice website”, for “any” substitute “a”.

7. In regulation 21, in paragraph (1), for “(if it has one)” substitute “or online practice profile”.

8.—(1) Regulation 64⁽¹⁹⁾ is amended as follows.

(2) In the heading, after “services” insert “: appointments and prescriptions”.

⁽¹⁷⁾ The NHS website is available at: <https://www.nhs.uk/>.

⁽¹⁸⁾ The definition of “practice website” was inserted by S.I. 2019/1137.

⁽¹⁹⁾ Relevant amending instrument is S.I. 2019/1137.

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- (3) Omit paragraphs (5) and (5A).
- (4) In paragraph (8)—
 - (a) omit “Where the contractor has a practice website”;
 - (b) for “that practice website” substitute “its practice website or online practice profile”.
- (5) In paragraph (9), omit the definition of “newly registered patient”.
- 9. In regulation 64A(20), after “regulation 61” insert “or regulation 64ZA(1) or (2)”.
- 10. In regulation 67F(21)—
 - (a) in paragraph (3), for sub-paragraph (a), substitute—
 - “(a) electronically at nhsdigital.costrecovery@nhs.net”;
 - (b) in paragraph (4)—
 - (i) in the words before sub-paragraph (a), for “Department for Work and Pensions” substitute “the NHS Business Services Authority”;
 - (ii) for sub-paragraphs (a) and (b), substitute—
 - “(a) electronically to nhsbsa.faregistrations@nhs.net, or
 - (b) by post in hard copy form to Cost Recovery, Overseas Healthcare Service, Bridge House, 152 Pilgrim Street, Newcastle Upon Tyne, NE1 6SN.”
- 11.—(1) Schedule 2 is amended as follows.
 - (2) In paragraph 15—
 - (a) in sub-paragraph (8)—
 - (i) in the words before paragraph (a), omit “, by no later than 31st March 2016,”;
 - (ii) in paragraph (a), for “(if it has one)” substitute “or online practice profile”;
 - (b) omit sub-paragraph (9).
 - (3) In paragraph 44, in sub-paragraph (c), for “(if any)” substitute “or the address at which its online practice profile is available”.

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 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 (c. 41). They apply to England only.

(20) Regulation 64A was inserted by S.I. 2018/844.

(21) Regulation 67F was inserted by S.I. 2017/908.

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

The GMS Contracts Regulations and the PMS Agreements Regulations are amended so as:

- (a) to make the offer and provision of a maternal postnatal check by a GP at 6 to 8 weeks following the delivery of a baby or discharge from secondary care, an “essential service” (see paragraph 2 of Schedule 1);
- (b) to enable electronic repeat dispensing to be provided by a dispenser other than a nominated dispenser (see paragraph 3 of Schedule 1 and paragraph 2 of Schedule 2);
- (c) where a contractor is able to send information to another NHS body, health care provider or to a patient by fax or by secure electronic means, to prevent the contractor sending information to, or receiving information from, that person by fax (see paragraph 4 of Schedule 1 and paragraph 3 of Schedule 2);
- (d) to require contractors to offer their registered patients the facility to access online their prospective medical records, as well as their coded records, and, if requested by patients, to offer the facility to access online their full historical medical records (see paragraph 5 of Schedule 1 and paragraph 4 of Schedule 2);
- (e) to require contractors to have an online presence (such as a website) and keep that profile up to date, as well as keeping their profile on the NHS website up to date (see paragraph 6 of Schedule 1 and paragraph 5 of Schedule 2).

These Regulations also make various consequential amendments (see paragraphs 7 to 10 and 13 of Schedule 1 and paragraphs 6 to 9 and 11 of Schedule 2).

The Regulations also make minor amendments to update contact details in regulation 74F of the GMS Contracts Regulations and regulation 67F of the PMS Agreements Regulations and to update paragraph 6 of Schedule 1 to the GMS Contracts Regulations so that it refers to the most recent edition of “Health for all Children” by Alan Emond (a revised fifth edition was published by OUP on 28th February 2019) (see paragraphs 11 and 12 of Schedule 1 and paragraph 10 of Schedule 2 to these Regulations).

A full Impact Assessment has not been produced for this instrument as no, or no significant impact, on the private, voluntary or public sector is foreseen.