
STATUTORY INSTRUMENTS

2025 No. 727

NATIONAL HEALTH SERVICE, ENGLAND

The National Health Service (General Medical Services Contracts and Personal Medical Services Agreements) (Amendment) Regulations 2025

Made - - - - 19th June 2025

Laid before Parliament 23rd June 2025

Coming into force in accordance with regulation 1(2)

The Secretary of State for Health and Social Care makes these Regulations in exercise of the powers conferred by sections 86(4), 89(1), (2) and (3), 94(1), (3) and (8), and 272(7) and (8) of the National Health Service Act 2006⁽¹⁾

Citation, commencement and extent

1.—(1) These Regulations may be cited as the National Health Service (General Medical Services Contracts and Personal Medical Services Agreements) (Amendment) Regulations 2025.

(2) These Regulations come into force—

(a) subject to sub-paragraph (b) on 21st July 2025;

(b) paragraphs 3 and 6 of Schedule 1 and paragraphs 3 and 6 of Schedule 2 come into force on 1st October 2025.

(3) These Regulations extend to England and Wales.

Amendment of the National Health Service (General Medical Services Contracts) Regulations 2015

2. The National Health Service (General Medical Services Contracts) Regulations 2015⁽²⁾ are amended in accordance with Schedule 1.

(1) [2006 c. 41](#) (“the 2006 Act”). Section 89(3) is amended by section 202(2) of the Health and Social Care Act [2012 \(c. 7\)](#) (“the 2012 Act”). Section 94 is amended by paragraph 38 of Schedule 4 to the 2012 Act, paragraph 52 of Schedule 9 to the Crime and Courts Act [2013 \(c. 22\)](#), and paragraph 11 of Schedule 3 to the Health and Care Act [2022 \(c. 31\)](#). There are amendments to sections 86, 89 and 94 which are not relevant to these Regulations. See section 275(1) of the 2006 Act for the definition of “prescribed” and “regulations”. By virtue of section 271(1) of the 2006 Act, the powers being exercised by the Secretary of State in the making of these Regulations are exercisable only in relation to England.

(2) [S.I. 2015/1862](#); relevant amending instruments are [S.I. 2017/908](#), [S.I. 2018/844](#), [S.I. 2019/1137](#), [S.I. 2020/226](#), [S.I. 2020/911](#), [S.I. 2021/331](#), [S.I. 2021/995](#), [S.I. 2022/687](#), [S.I. 2022/935](#), [S.I. 2023/98](#), [S.I. 2023/449](#), [S.I. 2023/1071](#) and [S.I. 2024/575](#).

Status: This is the original version (as it was originally made).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

Amendment of the National Health Service (Personal Medical Services Agreements) Regulations 2015

3. The National Health Service (Personal Medical Services Agreements) Regulations 2015(3) are amended in accordance with Schedule 2.

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

19th June 2025

Stephen Kinnock
Minister of State
Department of Health and Social Care

(3) S.I. 2015/1879; relevant amending instruments are S.I. 2017/908, S.I. 2018/844, S.I. 2019/1137, S.I. 2020/226, S.I. 2020/911, S.I. 2021/331, S.I. 2021/995, S.I. 2022/687, S.I. 2022/935, S.I. 2023/98, S.I. 2023/449, S.I. 2023/1071 and S.I. 2024/575.

Schedule 1

Regulation 2

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

Out of Area Registration

1. In regulation 30(1) (variation of contracts: registered patients from outside practice area), at the end of the paragraph insert “in accordance with paragraph 18 of Schedule 3”.

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

(a) at the beginning of sub-paragraph (1), for “The” substitute “Subject to sub-paragraph (1C), the”;

(b) after sub-paragraph (1) insert—

“(1A) NHS England may, following consultation with the Local Medical Committee (if any) for the area in which the contractor provides services under the contract, determine that in certain circumstances NHS England’s approval is required before a contractor accepts an application for inclusion in its list of patients in respect of a patient who resides outside the contractor’s practice area.

(1B) Where NHS England has made a determination in accordance with sub-paragraph (1A) it must set out the circumstances in which its approval is required in a notice to the contractor.

(1C) Where NHS England has made a determination in accordance with sub-paragraph (1A), a contractor may only accept an application for inclusion in its list of patients in respect of a person who resides outside the contractor’s practice area in the circumstances set out in a notice given under sub-paragraph (1B) with NHS England’s approval.”.

GP Connect

3. After regulation 68 (summary care record) insert—

“Enabling access to patient records through GP Connect

68A.—(1) Where the contractor holds a patient’s record on its computerised clinical systems, the contractor must ensure that its computerised clinical systems are configured to enable—

(a) GP Connect Access Record HTML and GP Connect Access Record Structured;
and

(b) GP Connect Update Record.

(2) A contractor must take all reasonable steps to ensure that the functionality referred to in paragraph (1) is operational at all times.

(3) In this regulation—

“GP Connect” means the national service known as GP Connect provided by NHS England which facilitates interconnectivity between computerised clinical systems;

“GP Connect Access Record HTML” means the functionality within GP Connect that allows records to be viewed in Hypertext Markup Language by other users of GP Connect for the purpose of direct care to a patient;

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

“GP Connect Access Record Structured” means the functionality within GP Connect that allows records to be viewed in a structured and coded format that is machine readable by other users of GP Connect for the purpose of direct care to a patient;

“GP Connect Update Record” means the functionality within GP Connect that allows consultation summaries to be sent electronically to the contractor by other users of GP Connect for integration into the patient’s record; and

“patient’s record” means computerised records kept in relation to a patient in accordance with regulation 67(1)(b).”. (4)

Patient Guidance

4. In regulation 73(5A) (requirement to have and maintain an online presence)—

(a) at the end of sub-paragraph (a) omit “and”;

(b) at the end of sub-paragraph (b) after “website” insert “, and”;

(c) after sub-paragraph (b) insert—

“(c) the General Practice Patient Guidance published on the NHS England website.”. (5)

Patient Safety

5. After regulation 74I (collection of data concerning use of online consultation tools and video consultations) insert—

“Recording and reviewing patient safety events

74J.—(1) The contractor must register for, and maintain an account with, the LFPSE Service that has administrator rights.

(2) In this regulation, “LFPSE Service” refers to the centralised system provided by NHS England to record information and provide data and analysis about events involving patient safety.”. (6)

Contact with the practice

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

(a) for sub-paragraph (1) substitute—

“(1) The contractor must take steps to ensure that all of the following means of contacting the contractor are available for patients throughout core hours—

(a) by attending the contractor’s practice premises;

(b) by telephone; and

(c) through the practice’s online consultation tool within the meaning given in regulation 71ZD(2).

(1A) The contractor must take steps to ensure that a patient who contacts the contractor through—

(a) any of the means listed in sub-paragraph (1)(a) to (c); or

(4) Information about the service is available online at: www.digital.nhs.uk/services/gp-connect.

(5) The guidance is available online at: <https://www.england.nhs.uk/long-read/25-26-gp-contract-you-and-your-general-practice/>. Hard copies are available from NHS England, Wellington House, 133-155 Wellington Road, London SE1 8UG.

(6) Information about the service is available online at: <https://www.england.nhs.uk/patient-safety/patient-safety-insight/learning-from-patient-safety-events/learn-from-patient-safety-events-service/>.

- (b) a relevant electronic communication method within the meaning given in regulation 71ZE(3),
is provided with an appropriate response in accordance with the following sub-paragraphs.”;
- (b) in sub-paragraph (3)(a), omit “under sub-paragraph (1)”.

Directed Enhanced Services

7. In Schedule 3, in paragraph 15(1)(b) (duty of co-operation), for “direction 5 of the Primary Medical Services (Directed Enhanced Services) Directions 2019” substitute “the Primary Medical Services (Directed Enhanced Services) Directions”.

8. In Schedule 3, in paragraph 44(9A) (sub-contracting of clinical matters), for “direction 4 of the Primary Medical Services (Directed Enhanced Services) Directions 2020” substitute “the Primary Medical Services (Directed Enhanced Services) Directions”.

9. In regulation 3(1) (interpretation), in the appropriate place insert—
““Primary Medical Services (Directed Enhanced Services) Directions” means directions relating to provision of enhanced services given to NHS England under section 98A(3) of the Act;”. (7)

Removal from the list of patients who are violent

10. In Schedule 3, in paragraph 25 (removal from the list of patients who are violent)—
- (a) in sub-paragraph (1A)(b) for “another provider” to the end substitute “another provider of primary medical services in response to a request for removal under paragraph (1),”;
 - (b) in sub-paragraph (1B)(a) omit from “set up” to “2020”;
 - (c) after sub-paragraph (2A) insert—
“(2B) In sub-paragraph (1B) “Violent Patient Scheme” means a scheme set up in accordance with the Primary Medical Services (Directed Enhanced Services) Directions to provide primary medical services to those removed from a contractor’s list of patients under paragraph (1).”.

Removal from the list of patients whose address is unknown

11. In Schedule 3, in paragraph 28(a) (removal from the list of patients whose address is unknown), for “six” substitute “three”.

Changes to constitution of a partnership

12.—(1) In Schedule 3, in paragraph 59 (variation provisions specific to a contract with two or more persons practising in partnership)—

- (a) in sub-paragraph (1)—
 - (i) after “continue with one” insert “or more”;
 - (ii) for the words from “that partner is” to the end substitute “the conditions in paragraph (1A) are satisfied.”;
- (b) after sub-paragraph (1) insert—

(7) These directions are available online at: <https://www.gov.uk/government/publications/primary-medical-services-directed-enhanced-services-directions> . Hard copies are available from the Department of Health and Social Care, 39 Victoria Street, London, SW1H 0EU.

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

- “(1A) The conditions are—
- (a) that partner is, or those partners are, named in a notice given under sub-paragraph (2);
 - (b) where one partner is named, that partner is a medical practitioner who satisfies the condition in regulation 5(1)(a);
 - (c) where more than one partner is named—
 - (i) each of those partners is either a medical practitioner or a person who satisfies the conditions specified in section 86(2)(b) of the Act (persons eligible to enter into GMS contracts); and
 - (ii) the new partnership satisfies the conditions imposed by regulations 5 and 6; and
 - (d) the requirements in sub-paragraphs (2) and (3) are met.”;
- (c) for sub-paragraphs (2) and (3) substitute—
- “(2) A contractor must give notice in writing to NHS England of—
- (a) the intention to change its status from that of a partnership to that of an individual medical practitioner; or
 - (b) the intention to change the composition of the partnership.
- (3) A notice given under sub-paragraph (2) must—
- (a) specify the date on which the contractor would like to change its status or composition, which must be at least 28 days after the date on which the contractor gives notice to NHS England under sub-paragraph (2);
 - (b) specify—
 - (i) where notice is given under paragraph (2)(a) the name of the medical practitioner with whom the contract is to continue;
 - (ii) where notice is given under paragraph (2)(b) the name and contact details of the partners with whom the contract is to continue; and
 - (c) be signed by each partner in the partnership.”;
- (d) In sub-paragraph (11), at the end insert “or the change in composition of the partnership.”.
- (2) In Schedule 3, in paragraph 67(3)(t) (other grounds for termination by NHS England)—
- (a) at the end of sub-paragraph (i) omit “or”;
 - (b) after sub-paragraph (ii) insert—
 - “, or
 - (ii) the partnership has dissolved in circumstances where sub-paragraph (i) and paragraph 59(4) do not apply and none of the former members of the partnership has been named in a notice given under paragraph 59(2) to continue the contract in accordance with paragraph 59(1);”.

Schedule 2

Regulation 3

Amendments to the National Health Service (Personal Medical Services Agreements) Regulations 2015

Out of Area Registration

1. In regulation 25(1) (variation of agreements: registered patients from outside practice area), at the end of the paragraph insert “in accordance with paragraph 17 of Schedule 2”.

2. In Schedule 2, in paragraph 17 (application for inclusion in a list of patients)—

(a) at the beginning of sub-paragraph (1), for “The” substitute “Subject to sub-paragraph (1C), the”;

(b) after sub-paragraph (1) insert—

“(1A) NHS England may, following consultation with the Local Medical Committee (if any) for the area in which the contractor provides services under the contract, determine that in certain circumstances NHS England’s approval is required before a contractor accepts an application for inclusion in its list of patients in respect of a patient who resides outside the contractor’s practice area.

(1B) Where NHS England has made a determination in accordance with sub-paragraph (1A) it must set out the circumstances in which its approval is required in a notice to the contractor.

(1C) Where NHS England has made a determination in accordance with sub-paragraph (1A), a contractor may only accept an application for inclusion in its list of patients in respect of a person who resides outside the contractor’s practice area in the circumstances set out in a notice given under sub-paragraph (1B) with NHS England’s approval.”.

GP Connect

3. After regulation 61 (summary care record) insert—

“Enabling access to patient records through GP Connect

61A.—(1) Where the contractor holds a patient’s record on its computerised clinical systems, the contractor must ensure that its computerised clinical systems are configured to enable—

(a) GP Connect Access Record HTML and GP Connect Access Record Structured; and

(b) GP Connect Update Record.

(2) A contractor must take all reasonable steps to ensure that the functionality referred to in paragraph (1) is operational at all times.

(3) In this regulation—

“GP Connect” means the national service known as GP Connect provided by NHS England which facilitates interconnectivity between computerised clinical systems;

“GP Connect Access Record HTML” means the functionality within GP Connect that allows records to be viewed in Hypertext Markup Language by other users of GP Connect for the purpose of direct care to a patient;

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

“GP Connect Access Record Structured” means the functionality within GP Connect that allows records to be viewed in a structured and coded format that is machine readable by other users of GP Connect for the purpose of direct care to a patient;

“GP Connect Update Record” means the functionality within GP Connect that allows consultation summaries to be sent electronically to the contractor by other users of GP Connect for integration into the patient’s record; and

“patient’s record” means computerised records kept in relation to a patient in accordance with regulation 60(2)(b).”. (8)

Patient Guidance

4. In regulation 66(5A) (requirement to have and maintain an online presence)—

(a) at the end of sub-paragraph (a) omit “and”;

(b) at the end of sub-paragraph (b) after “website” insert “, and”;

(c) after sub-paragraph (b) insert—

“(c) the General Practice Patient Guidance published on the NHS England website.”. (9)

Patient Safety

5. After regulation 67I (collection of data concerning use of online consultation tools and video consultations) insert—

“Recording and reviewing patient safety events

67J.—(1) The contractor must register for, and maintain an account with, the LFPSE Service that has administrator rights.

(2) In this regulation, “LFPSE Service” refers to the centralised system provided by NHS England to record information and provide data and analysis about events involving patient safety.”. (10)

Contact with the practice

6. In Schedule 2, in paragraph 5 (contact with the practice)—

(a) for sub-paragraph (1) substitute—

“(1) The contractor must take steps to ensure that all of the following means of contacting the practice are available for patients throughout core hours—

(a) by attending the contractor’s practice premises;

(b) by telephone; and

(c) through the practice’s online consultation tool within the meaning given in regulation 64ZD(2).

(1A) The contractor must take steps to ensure that a patient who contacts the contractor through—

(a) any of the means listed in sub-paragraph (1)(a) to (c); or

(8) Information about the service is available online at: www.digital.nhs.uk/services/gp-connect.

(9) The guidance is available online at: <https://www.england.nhs.uk/long-read/25-26-gp-contract-you-and-your-general-practice/>. Hard copies are available from NHS England, Wellington House, 133-155 Wellington Road, London SE1 8UG.

(10) Information about this service is available online at: <https://www.england.nhs.uk/patient-safety/patient-safety-insight/learning-from-patient-safety-events/learn-from-patient-safety-events-service/>.

- (b) a relevant electronic communication method within the meaning given in regulation 64ZE(3);
- is provided with an appropriate response in accordance with the following sub-paragraphs.”;
- (b) in sub-paragraph (3)(a), omit “under sub-paragraph (1)”.

Directed Enhanced Services

7. In Schedule 2, in paragraph 10(1)(a) (duty of co-operation), for “direction 5 of the Primary Medical Services (Directed Enhanced Services) Directions 2019” substitute “the Primary Medical Services (Directed Enhanced Services) Directions”.

8. In Schedule 2, in paragraph 43(4A) (sub-contracting of clinical matters), for “direction 4 of the Primary Medical Services (Directed Enhanced Services) Directions 2020” substitute “the Primary Medical Services (Directed Enhanced Services) Directions”.

9. In regulation 3 (interpretation), in the appropriate place insert—
- ““Primary Medical Services (Directed Enhanced Services) Directions” means directions relating to provision of enhanced services given to NHS England under section 98A(3) of the Act;”. (11)

Removal from the list of patients who are violent

10. In Schedule 2, in paragraph 24 (removal from the list of patients who are violent)—
- (a) in sub-paragraph (1A)(b) for “another provider” to the end substitute “another provider of primary medical services in response to a request for removal under paragraph (1),”;
 - (b) in sub-paragraph (1B)(a) omit from “set up” to “2020”;
 - (c) after sub-paragraph (2A) insert—
- “(2B) In sub-paragraph (1B) “Violent Patient Scheme” means a scheme set up in accordance with the Primary Medical Services (Directed Enhanced Services) Directions to provide primary medical services to those removed from a contractor’s list of patients under paragraph (1).”.

Removal from the list of patients whose address is unknown

11. In Schedule 2, in paragraph 27(a) (removal from the list of patients whose address is unknown), for “six” substitute “three”.

(11) These directions are available online at: <https://www.gov.uk/government/publications/primary-medical-services-directed-enhanced-services-directions>. Hard copies are available from the Department of Health and Social Care, 39 Victoria Street, London, SW1H 0EU.

EXPLANATORY NOTE

(This note is not part of the Regulations)

Regulation 2 and Schedule 1 to these Regulations amend the National Health Service (General Medical Services Contracts) Regulations 2015 ([S.I. 2015/1862](#)) (“the GMS Contracts Regulations”). Regulation 3 and Schedule 2 to these Regulations amend the National Health Service (Personal Medical Services Agreements) Regulations 2015 ([S.I. 2015/1879](#)) (“the PMS Agreements Regulations”).

The GMS Contracts Regulations and the PMS Agreements Regulations respectively 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). The Regulations apply to England only.

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

- (a) require contractors to seek approval from NHS England before accepting patients residing outside their practice area where NHS England has set out circumstances where such approval is required and those circumstances apply;
- (b) require contractors to enable functionality in their computerised systems that allows access to and updating of patient records through GP Connect;
- (c) require contractors to provide a link to the General Practice Patient Guidance on their websites;
- (d) require contractors to register for and maintain an account with the learn from patient safety events service;
- (e) ensure that patients are able to contact the contractor through the online consultation tool as well as in person at the practice premises and by telephone during core hours;
- (f) clarify the circumstances in which a contractor can remove a patient from its list of patients where it becomes aware that a patient has been previously removed from the list of patients of another provider due to an act or threat of violence;
- (g) reduce the notice period that NHS England must give to the contractor before removal of a patient from its list of patients where the address of the patient is no longer known;
- (h) update references to directions relating to the provision of enhanced services.

The GMS Contracts Regulations are also amended to clarify, in relation to contracts held by individuals in partnership, the requirements in relation to changes to the composition of the partnership.