

Standard Personal Medical Services Agreement Variation Notice 2019

April 2019



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Timing / Deadlines (if applicable)	
Contact Details for further information	NHS England GP Contracts Team Quarry House Leeds LS2 7UE england.gpcontracts@nhs.net https://www.england.nhs.uk/gp/gpfv/investment/gp-contract/
Document Status	This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of this document are not controlled. As a controlled document, this document should not be saved onto local or network drives but should always be accessed from the intranet.

Standard Personal Medical Services Agreement Variation Notice – 2019

The text of the Standard Personal Medical Services Variation Notice 2019 has been prepared by the Strategy & Innovation Directorate, NHS England and has been approved by the British Medical Association. It is prepared on the basis that the numbering adopted in the signed contract follows that used in the model Standard Personal Medical Services Agreement dated April 2019

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NHS ENGLAND
Standard Personal Medical Services Agreement Variation Notice – 2019

Dear Sir/Madam

**Notice of Variation to your Personal Medical Services Agreement dated
[]**

We give you notice under paragraph 52(2) of Schedule 2 to the National Health Service (Personal Medical Services Agreements) Regulations 2015 (S.I. 2015/1879) that the terms of your personal medical services agreement dated [] are varied as set out below with effect from [*insert here date on which variations will take effect. Where reasonably practicable this should not be less than 14 days after the date on which this notice is served. This is a regulatory requirement.*].

These variations are made to comply with the terms of the:

- National Health Service (Pharmaceutical Services, Charges and Prescribing) (Amendment) Regulations 2018/1114;
- National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013/349; and
- for the avoidance of doubt nothing in the agreement shall effect accrued rights or liabilities up to the date of the variation.

and are published on the government website legislation.gov.uk.

NHS ENGLAND
Standard Personal Medical Services Agreement Variation Notice – 2019

We request you to acknowledge receipt of this notice by signing and returning the enclosed duplicate of it.

Dated:

Signed:

on behalf of NHS England

Print name:

Wording of Variations

Clause 1 Definitions and Interpretation

1. The following amendments are made to **clause 1.1**:

1.1. In paragraph (b)(ii) of the definition of "prescription form", for "nominated dispensing contractor" substitute "nominated dispenser or via an information hub".

1.2. In paragraph (b)(ii) of the definition of "repeatable prescription", for "nominated dispensing Contractor" substitute "nominated dispenser or via an information hub".

1.3. At the appropriate place in the alphabetical order insert—

"authorised person", in relation to a Patient, is a person who is entitled to make an application for pharmaceutical services on behalf of the Patient by virtue of regulation 116(a) to (c) of the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (authorised persons to apply for services);".

1.4. At the appropriate place in the alphabetical order insert—

"contractor's EPS phase 4 date" means the date, encoded within the Electronic Prescription Service software, which is the date that a contractor has agreed is to be the date on and after which the contractor's prescribers are to use the Electronic Prescription Service for all eligible prescriptions;".

1.5. At the appropriate place in the alphabetical order insert—

“**EPS token**” means a form (which may be an electronic form), approved by the Secretary of State, which—

- (a) is issued by a prescriber at the same time as an electronic prescription is created; and
- (b) has a barcode that enables the prescription to be dispensed by a provider of pharmaceutical services that is able to use the Electronic Prescription Service for the purposes of dispensing prescriptions, in circumstances where the provider is not dispensing the prescription as a nominated dispenser;”.

1.6. At the appropriate place in the alphabetical order insert—

“**Pharmaceutical Regulations**” means the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013;”.

Clauses 2 to 23

No variations.

Clause 24 Notification Requirements in Respect of Relevant Prescribers

2. The following amendments are made to **clause 24**:

2.1. After clause 24.7, insert the following clause—

“24.8 Where the Contractor is a dispensing doctor within the meaning of the Pharmaceutical Regulations,¹ the provisions in Schedule 14 will apply.”

Schedules 1 to 3

No variations.

¹ See regulation 46(1) of the *Pharmaceutical Regulations*.

Schedule 4 Prescribing

3. The following amendments are made to **paragraph 1**:

3.1. In paragraph 1.2, for "paragraph 1.3 and 1.4" substitute "paragraphs 1.2A, 1.3 and 1.4".

3.2. After paragraph 1.2, insert the following paragraphs—

"1.2A If, on a particular occasion when a drug, medicine or appliance is needed as mentioned in paragraph 1.2—

1.2A.1 the prescriber is able, without delay, to order the drug, medicine or appliance by means of an electronic prescription;

1.2A.2 the Electronic Prescription Service software that the prescriber would use for that purpose provides for the creation and transmission of electronic prescriptions without the need for a nominated dispenser; and

1.2A.3 none of the reasons for issuing a non-electronic prescription form or a non-electronic repeatable prescription given in paragraph 1.2B apply,

the prescriber must create and transmit an electronic prescription for that drug, medicine or appliance.

1.2B The reasons given in this paragraph are—

1.2B.1 although the prescriber is able to use the Electronic Prescription Service, the prescriber is not satisfied that—

1.2B.1.1 the access that the prescriber has to the Electronic Prescription Service is reliable,
or

NHS ENGLAND
Standard Personal Medical Services Agreement Variation Notice – 2019

- 1.2B.1.2 the Electronic Prescription Service is functioning reliably;
- 1.2B.2 the Patient, or where appropriate the Patient's authorised person, informs the prescriber that the Patient wants the option of having the prescription dispensed elsewhere than in England;
- 1.2B.3 the Patient, or where appropriate the Patient's authorised person, insists on the Patient being issued with a non-electronic prescription form or a non-electronic repeatable prescription for a particular prescription and in the professional judgment of the prescriber the welfare of the Patient is likely to be in jeopardy unless a non-electronic prescription form or a non-electronic repeatable prescription is issued;
- 1.2B.4 the prescription is to be issued before the contractor's EPS phase 4 date or the contractor has no such date."

4. The following amendments are made to **paragraph 2**:

4.1. In paragraph 2.1, omit sub-paragraphs 2.1.1 and 2.1.2.

4.2. In paragraph 2.1, renumber sub-paragraph "2.1.3" as sub-paragraph "2.1.1", and renumber the sub-paragraphs of that paragraph accordingly.

4.3. After paragraph 2.1, insert the following paragraphs—

"2.1A If a prescriber orders a drug, medicine or appliance by means of an electronic prescription, the prescriber must issue the Patient with—

2.1A.1 subject to paragraph 2.1C, an EPS token; and

NHS ENGLAND
Standard Personal Medical Services Agreement Variation Notice – 2019

2.1A.2 if the Patient, or where appropriate an authorised person, so requests, a written record of the prescription that has been created.

2.1B On and after the contractor's EPS phase 4 date, if the order is eligible for Electronic Prescription Service use, the prescriber must ascertain if the Patient, or where appropriate the Patient's authorised person, wants to have the electronic prescription dispensed by a nominated dispenser.

2.1C The prescriber must not issue the Patient with an EPS token if the Patient, or where appropriate the Patient's authorised person, wants to have the electronic prescription dispensed by a nominated dispenser."

4.4. Omit paragraphs 2.3 and 2.4.

5. The following amendments are made to **paragraph 3**—

5.1. In paragraph 3.1—

5.1.1. in the opening words, after "its Patients must", insert ", if a Patient, or where appropriate the Patient's authorised person, so requests,"; and

5.1.2. in sub-paragraph 3.1.1, after "chosen by the Patient", insert ", or where appropriate the Patient's authorised person".

5.2. Omit paragraph 3.4.

5.3. In paragraph 3.5—

5.3.1. in sub-paragraph 3.5.1, after "the Patient" insert "or the Patient's authorised person"; and

5.3.2. in sub-paragraph 3.5.2—

5.3.2.1. after "by the Patient", insert "or the Patient's authorised person",

5.3.2.2. after "whom the Patient", insert "or the Patient's authorised person", and

5.3.2.3. after "provide the Patient", insert "or, as the case may be, the Patient's authorised person".

5.4. Renumber clause "3.5" as "3.4", and renumber the sub-paragraphs of that clause accordingly.

Schedules 5 to 13

No Variations

Schedule 14 Dispensing Doctors

6. After Schedule 13, insert the below Schedule 14—

"SCHEDULE 14² Dispensing Doctors

Arrangements for Pharmaceutical services

1. The Contractor undertakes to provide pharmaceutical services in accordance with such provisions as are appropriate affecting the Contractor's rights and obligations that:
 - (a) are included in the Pharmaceutical Regulations;
 - (b) are contained in the terms set out in this Schedule;
 - (c) were imposed, in relation to the **dispensing doctor's** ability to provide pharmaceutical services, by virtue of regulation 20(2) of the National Health Service (Pharmaceutical Services) Regulations 2005 (imposition of conditions) (S.I. 2005/641);
 - (d) are included in clause 74 of this Contract; and
 - (e) are:
 - (i) included in regulations under section 225 of the Local Government and Public Involvement in Health Act 2007 (duties of services-providers to allow entry by Local Healthwatch organisations or contractors), and
 - (ii) made for the purpose of imposing on a services-provider (within the meaning of that section) a duty to allow authorised representatives (within the meaning of that section) to enter and view, and observe the carrying-on of activities on, premises owned or controlled by the services-provider.

² Clause 24.8 applies the provisions in this Schedule to contractors who are *dispensing doctors*.

2. The terms set out in bold italics in this Schedule have the same meaning as in the Pharmaceutical Regulations.

Dispensing doctor lists

3. Where a Contractor is listed in a ***dispensing doctor list***:
- (a) the Contractor must notify the Board of the matters referred to in paragraph 4; and
 - (b) as part of the listing of the Contractor in its ***dispensing doctor list***, the Board must include the names of any ***general practitioner*** notified under paragraph 4(a), unless the Board has received a further notification in respect of that ***general practitioner*** under paragraph 4(b).
4. The matters referred to in paragraph 3(a) are:
- (a) any ***general practitioner*** who performs Primary Medical Services on behalf of the Contractor, and whom the Contractor anticipates will provide pharmaceutical services on the behalf of the Contractor; and
 - (b) for a ***general practitioner*** about whom the Board has been notified under paragraph (a), when the Contractor no longer anticipates that the ***general practitioner*** will provide pharmaceutical services on behalf of the Contractor.

Persons duly authorised to dispense on behalf of *dispensing doctors*

5. Where paragraphs 6 to 31 impose a requirement on a ***dispensing doctor*** in respect of an activity which that ***dispensing doctor*** has duly authorised another person to undertake, if that other person undertakes that activity instead of the ***dispensing doctor***:
- (a) that other person must comply with that requirement; and
 - (b) the ***dispensing doctor*** must secure compliance with that requirement by that other person.
6. Where reference is made in paragraph 5 and paragraphs 7 to 31 to the ***dispensing doctor***:
- (a) being the subject of an activity, and in fact a person duly authorised by the ***dispensing doctor*** is the subject of that activity; or
 - (b) forming a view, and in fact a person duly authorised by the ***dispensing doctor*** is to form that view,
- that reference is to be construed as referring, as appropriate, to that duly authorised person.
7. References in paragraphs 5 to 31 to a ***dispensing doctor*** are to be construed in accordance with paragraphs 5 and 6.

Dispensing of drugs and *appliance*s by another *prescriber*

8. In paragraphs 9 and 10, “signed” includes signature with a ***prescriber’s advanced electronic signature***.

9. Subject to paragraphs 10 to 31, where:
- (a) any person presents to a **dispensing doctor a non-electronic prescription form** which contains
 - (i) an order for drugs, not being **Scheduled drugs**, or for **appliances**, not being **restricted availability appliances**, signed by a **prescriber** other than the **dispensing doctor**;
 - (ii) an order for drugs specified in Schedule 2 to the **Prescription of Drugs Regulations** (drugs, medicines and other substances that may be ordered only in certain circumstances), signed by a **prescriber** other than the **dispensing doctor**, and including the reference “SLS”; or
 - (iii) an order for **restricted availability appliances**, signed by a **prescriber** other than the **dispensing doctors** and including the reference “SLS”; or
 - (b) subject to paragraph 11, the **dispensing doctor** receives from the **Electronic Prescription Service** an **electronic prescription form** which contains an order of a kind specified in paragraphs (a)(i) to (a)(iii) and:
 - (i) any person requests the provision of drugs or **appliances** in accordance with that prescription; or
 - (ii) the **dispensing doctor** has previously arranged with the patient that the **dispensing doctor** will dispense that prescription on receipt; or
 - (iii) any person presents the **dispensing doctor** with an EPS token that relates to an order of a kind specified in paragraphs 9(a)(i) – (iii) and requests the provision of drugs or appliances in accordance with the related **electronic prescription form**;

and the **dispensing doctor** is authorised or required by virtue of Part 8 of the Pharmaceutical Regulations to provide the drugs or **appliances** so ordered, the **dispensing doctor** must, with reasonable promptness, provide the drugs so ordered, and such of the **appliances** so ordered as the **dispensing doctor** supplies in the normal course of business.

10. Subject to paragraphs 11 to 31, where:
- (a) any person presents to the **dispensing doctor a non-electronic repeatable prescription** which contains:
 - (i) an order for drugs, not being **Scheduled drugs** or controlled drugs within the meaning of the Misuse of Drugs Act 1971, other than a drug which is for the time being specified in Schedule 4 or 5 to the Misuse of Drugs Regulations 2001 (S.I. 2001/3998) (which relate to controlled drugs excepted from certain prohibitions under those regulations), signed by a **prescriber** other than the **dispensing doctor**;
 - (ii) an order for a drug specified in Schedule 2 to the **Prescription of Drugs Regulations**, not being a controlled

drug within the meaning of the Misuse of Drugs Act 1971, other than a drug which is for the time being specified in Schedule 4 or 5 to the Misuse of Drugs Regulations 2001, signed by a **prescriber** other than the **dispensing doctor** and including the reference “SLS”;

- (iii) an order for **appliances**, not being **restricted availability appliances**, signed by a **prescriber** other than the **dispensing doctor**; or
- (iv) an order for a **restricted availability appliance**, signed by a **prescriber** other than the **dispensing doctor** and including the reference “SLS”,

and also presents an associated **batch issue**; or

- (b) the **dispensing doctor** receives as a **nominated dispensing contractor** an **electronic repeatable prescription** from the Electronic Prescription Service which contains an order of a kind specified in sub-paragraphs (a)(i) to (a)(iv) and:
 - (i) any person requests the provision of drugs or **appliances** in accordance with that **repeatable prescription**; or
 - (ii) the **dispensing doctor** has previously arranged with the patient that the **dispensing doctor** will dispense that **repeatable prescription** on receipt; or
- (c) any person presents the **dispensing doctor** with an EPS token that relates to an order of a kind specified in paragraph 10(a)(i) – (iv) and requests the provision of drugs or appliances in accordance with the related **electronic prescription form**; and

the **dispensing doctor** is authorised or required by virtue of Part 8 of the Pharmaceutical Regulations to provide the drugs or **appliances** so ordered, the **dispensing doctor** must, with reasonable promptness, provide the drugs so ordered, and such of the **appliances** so ordered as **the dispensing doctor** supplies in the normal course of business.

11. The **dispensing doctor** must not provide under an **electronic prescription form** a controlled drug within the meaning of the Misuse of Drugs Act 1971, other than a drug which is for the time being specified in Schedules 2 to 5 to the Misuse of Drugs Regulations 2001.
12. For the purposes of paragraphs 8 to 11, a **non-electronic repeatable prescription** for drugs or **appliances** shall be taken to be presented even if the person who wishes to obtain the drugs or **appliances** does not present that prescription, where:
 - (a) the **dispensing doctor** has that prescription in their possession; and
 - (b) that person presents, or the **dispensing doctor** has in their possession, an associated **batch issue**.
13. Drugs and **appliances** provided under paragraphs 8 to 12 must be provided in a suitable container.

Dispensing of drugs and appliances ordered by the dispensing doctor

14. In the circumstances where paragraphs 8 to 13 do not apply and subject to paragraphs 15 to 31, where the **dispensing doctor** is authorised or required by virtue of Part 8 of the Pharmaceutical Regulations to provide a drug or **appliance** to a person:
- (a) the **dispensing doctor** must record any order for the provision of any drugs or **appliances** which are needed for the treatment of the patient, before the drugs or **appliances** are dispensed (unless it is personally administered):
 - (i) on a **prescription form** completed in accordance with paragraph 1.2 to paragraph 1.14 of Schedule 4;
 - (ii) if paragraph 2 of Schedule 4 applies, on an **electronic prescription form**; or
 - (iii) in the case of a personally administered vaccine in respect of which the **NHS BSA** does not require an individual **prescription form** in order to process payment, on the form provided by the **NHS BSA** for the purposes of claiming payments for administering that vaccine (as well, potentially, as claiming other payments), and in the manner required by the **NHS BSA** (which may be part of an aggregate total);
 - (b) the **dispensing doctor** must provide those drugs or **appliances** in a suitable container (unless it is personally administered);
 - (c) the **dispensing doctor** must provide for the patient a drug specified in Schedule 2 to the **Prescription of Drugs Regulations** (drugs, medicines and other substances that may be ordered only in certain circumstances) only where paragraph 6.3 of Schedule 4 is satisfied; and
 - (d) the **dispensing doctor** must provide for the patient a **restricted availability appliance** only if the patient is a person, or it is for a purpose, specified in the *Drug Tariff*.

Preliminary matters before providing ordered drugs or appliances

15. Before providing any drugs or **appliances** in accordance with paragraph 14, or in the circumstances set out in paragraph 17:
- (a) a **dispensing doctor** must ask any person who makes, or duly completes, a declaration, as or on behalf of the person named on the prescription form or repeatable prescription, that the patient does not have to pay the charges specified in regulation 4(1) of the **Charges Regulations** (supply of drugs and appliances by doctors) by virtue of either:
 - (i) entitlement to exemption under regulation 10(1) of the **Charges Regulations** (exemptions), or
 - (ii) entitlement to remission of charges under regulation 5 of the **Remission of Charges Regulations** (entitlement to full remission and payment),

to produce satisfactory evidence of such entitlement, unless the declaration is in respect of entitlement to exemption by virtue of

regulation 10(1) of the **Charges Regulations** or in respect of entitlement to remission by virtue of regulation 5 of the **Remission of Charges Regulations**, and at the time of the declaration the **dispensing doctor** has such evidence available to them;

- (b) in any case where no satisfactory evidence, as required by sub-paragraph (a), is produced to the **dispensing doctor**, the **dispensing doctor** must ensure before the drugs or **appliances** are provided that the person who was asked to produce that evidence is advised, in appropriate terms, that checks are routinely undertaken to ascertain entitlement to:
- (i) exemption under the **Charges Regulations**; or
 - (ii) remission of charges under the **Remission of Charges Regulations**,

where such entitlement has been claimed, as part of the arrangements for preventing or detecting fraud or error in relation to such claims;

- (c) if in the case of a **non-electronic prescription form** or **non-electronic repeatable prescription**, no satisfactory evidence, as required by sub-paragraph (a), is produced to the **dispensing doctor**, the **dispensing doctor** must endorse the form on which the declaration is made to that effect; and
- (d) in the case of an **electronic prescription**, the **dispensing doctor** must ensure that the records and confirmations referred to in paragraph 16 is duly entered into the records managed by the **Information Centre** that are accessible as part of the Electronic Prescription Service (if either it is not already recorded in those records or a check, known as a real time exemption check, has not produced satisfactory evidence as mentioned in sub-paragraph (a)).

16. The records and confirmations referred to in sub-paragraph 15(d) are:

- (a) in a case where the exemption from or remission of charges is claimed for all or some of the items included in the prescription, a record of:
- (i) the exemption category specified in regulation 10(1) of the **Charges Regulations** or the ground for remission under regulation 5 of the **Remission of Charges Regulations** which it is claimed applies to the case; and
 - (ii) whether or not satisfactory evidence was produced to the **dispensing doctor** as required by sub-paragraph 15(a);
- (b) in any case where a charge is due, confirmation that the relevant charge was paid; and
- (c) in the case of a prescription for or including contraceptive substances, confirmation that no charge was payable in respect of those substances.

16A. For the purposes of paragraphs 15 and 16, satisfactory evidence includes evidence derived from a check, known as a real time exemption check, of

electronic records that are managed by **NHS BSA** for the purposes (amongst other purposes) of providing advice, assistance and support to patients or their representatives in respect of whether a charge is payable under the Charges Regulations.

- 16B. If the **dispensing doctor** dispenses an electronic prescription, the **dispensing doctor** must send the form duly completed by or on behalf of the patient, if one is required under regulations 4(2)(b) or (3A) of the Charges Regulations in respect of that electronic prescription (which may be the associated EPS token), to the **NHS BSA**.

Provision of *Scheduled drugs*

17. The **dispensing doctor** must only provide for a patient any **Scheduled drug** if:
- (a) it is ordered as specified in paragraph 18 or 20; or
 - (b) in the case of a drug specified in Schedule 2 to the **Prescription of Drugs Regulations** (drugs, medicines and other substances that may be ordered only in certain circumstances), it is ordered in the circumstances prescribed in that Schedule.
18. A **Scheduled drug** that is a drug with an appropriate **non-proprietary name** may be provided in response to an order on a **prescription form** or **repeatable prescription** for a drug (“the prescribed drug”) that is not a **Scheduled drug** but which has the same **non-proprietary name** as the **Scheduled drug** if:
- (a) the prescribed drug is ordered by that **non-proprietary name** or by its formula; and
 - (b) the prescribed drug has the same specification as the **Scheduled drug** (so the **Scheduled drug** may be dispensed generically).
19. If a **Scheduled drug** is a combination of more than one drug, it can only be ordered as specified in paragraph 18 if the combination has an appropriate **non-proprietary name**, whether or not the drugs in the combination each have such names.
20. Nothing in paragraphs 5 to 19 and paragraphs 21 to 31 prevents the **dispensing doctor** from providing, otherwise than under pharmaceutical services, a **Scheduled drug** or a **restricted availability appliance** for a patient.

Refusal to provide drugs or *appliances* ordered

21. The **dispensing doctor** may refuse to provide the drugs or **appliances** ordered on a **prescription form** or **repeatable prescription** where:
- (a) the **dispensing doctor** reasonably believes that it is not a genuine order for the person named on the **prescription form** or the **repeatable prescription** (for example because the **dispensing doctor** reasonably believes it has been stolen or forged);
 - (b) it appears to the **dispensing doctor** that there is an error on the **prescription form** or on the **repeatable prescription** or, in the case

of a **non-electronic repeatable prescription**, its associated **batch issue** (including a clinical error made by the **prescriber**) or that, in the circumstances, providing the drugs or **appliances** would be contrary to the **dispensing doctor's** clinical judgement; or

- (c) where the **prescription form** or **repeatable prescription** is incomplete because it does not include the information relating to the identification of the **prescriber** that the Board (or the person exercising its functions) requires in order to perform its functions relating to:
- (i) the remuneration of persons providing pharmaceutical services, and
 - (ii) any apportionment of, or any arrangements for recharging in respect of, that remuneration,

unless the **dispensing doctor** (or the person who employs or engages the **dispensing doctor**) is to receive no pharmaceutical remuneration of any kind in respect of the drug or **appliance**.

- 21A. The **dispensing doctor** may refuse to provide a drug or appliance ordered on an electronic prescription if the access that the **dispensing doctor** has to the Electronic Prescription Service is not such as to enable the **dispensing doctor** to dispense that prescription promptly (or at all).
22. The **dispensing doctor** must refuse to provide drugs or **appliances** ordered on a **repeatable prescription** where:
- (a) the **dispensing doctor** has no record of that prescription;
 - (b) the **dispensing doctor** does not, in the case of a **non-electronic repeatable prescription**, have any associated **batch issue** and it is not presented to the **dispensing doctor**;
 - (c) it is not signed by a **prescriber**;
 - (d) to do so would not be in accordance with any intervals specified in the prescription;
 - (e) it would be the first time a drug or appliance had been provided pursuant to the prescription and the prescription was signed (whether electronically or otherwise) more than 6 months previously;
 - (f) the **repeatable prescription** was signed (whether electronically or otherwise) more than one year previously;
 - (g) the expiry date on the **repeatable prescription** has passed; or
 - (h) the **dispensing doctor** has been informed by the **prescriber** that the prescription is no longer required.
23. Where a patient requests the supply of drugs or **appliances** ordered on a **repeatable prescription** (other than on the first occasion that the patient makes such a request), the **dispensing doctor** must only provide the drugs or **appliances** ordered if the **dispensing doctor** is satisfied that the patient to whom the prescription relates:

NHS ENGLAND

Standard Personal Medical Services Agreement Variation Notice – 2019

- (a) is taking or using, and is likely to continue to take or use, the drug or **appliance** appropriately; and
- (b) is not suffering from any side effects of the treatment which indicates the need or desirability of reviewing the patient's treatment,

and that the conditions in paragraph 24 are also satisfied.

24. The conditions referred to in paragraph 23 with which the dispensing doctor must be satisfied are:

- (a) that the medication regimen of the patient to whom the prescription relates has not altered in a way which indicates the need or desirability of reviewing the patient's treatment; and
- (b) there have been no changes to the health of the patient to whom the prescription relates which indicate the need or desirability of reviewing the patient's treatment.

Dispensing doctors issuing prescription forms which may be presented to an NHS chemist

25. Notwithstanding the existence of arrangements under which the ***dispensing doctor*** is to provide pharmaceutical services to a patient, if the ***dispensing doctor*** determines that the patient requires a drug or ***appliance*** that is available on prescription from an ***NHS chemist***:

- (a) the ***dispensing doctor*** may with the agreement of the patient issue;
or
- (b) if the patient so requests, the ***dispensing doctor*** must not unreasonably refrain from issuing,

a ***prescription form*** that the patient may present to any ***NHS chemist*** instead of the ***dispensing doctor*** supplying that drug or ***appliance*** to the patient.

Complaints procedures

26. The complaints procedure established in accordance with Part 24 is also to apply in relation to a complaint about any matter reasonably connected with the provision of pharmaceutical services by the Contractor or individual.

Inspections and access to information

27. In addition to the requirements relating to inspections and access to information in Part 16, the ***dispensing doctor*** must allow persons authorised in writing by the Board to enter and inspect any premises the ***dispensing doctor*** uses for the provision of pharmaceutical services at any reasonable time, for the purposes of:

- (a) ascertaining whether or not the ***dispensing doctor*** is complying with the requirements of paragraphs 5 to 31;
- (b) auditing, monitoring and analysing:
 - (i) the provision made by the ***dispensing doctor***, in the course of providing pharmaceutical services, for patient care and treatment; and

(ii) the management by the **dispensing doctor** of the pharmaceutical services the **dispensing doctor** provides, where the conditions in paragraph 28 are satisfied.

28. The conditions referred to in paragraph 27 are that:
- (a) reasonable notice of the intended entry has been given;
 - (b) the Local Medical Committee for the area where the premises are situated have been invited to be present at the inspection, where this is requested by the **dispensing doctor**;
 - (c) the person authorised in writing carries written evidence of their authorisation, which they must produce on request; and
 - (d) the person authorised in writing does not enter any part of the premises used solely as residential accommodation without the consent of the resident.
29. The **dispensing doctor** must, at the request of the Board or the person authorised in writing, allow the Board or that authorised person access to any information which either reasonably requires:
- (a) for the purposes mentioned in paragraph 27; or
 - (b) in the case of the Board, in connection with its functions that relate to pharmaceutical services.

Voluntary closure of premises

30. Where the **dispensing doctor** wishes:
- (a) to withdraw from a **dispensing doctor list**, or
 - (b) except in the circumstances described in paragraph 31, for particular listed dispensing premises no longer to be listed in relation to the **dispensing doctor**,
- the **dispensing doctor** must notify the Board of that wish at least 3 months in advance of the date on which pharmaceutical services are no longer to be provided, unless it is impracticable for the **dispensing doctor** to do so, in which case the **dispensing doctor** must notify the Board as soon as it is practicable.
31. If particular listed dispensing premises no longer need to be listed in relation to the **dispensing doctor** as a consequence of a relocation application under regulation 55 of the Pharmaceutical Regulations, before the date on which the **dispensing doctor** commences the provision of pharmaceutical services at the new premises, the **dispensing doctor** must give notice to the Board of when, before that date, the **dispensing doctor** is to cease to provide pharmaceutical services at the existing premises.

NHS ENGLAND
Standard Personal Medical Services Agreement Variation Notice – 2019

I/We [] acknowledge receipt of the notice of variation dated [] of which the above is a duplicate. I/We acknowledge that this notice will take effect from [].

Signed:

[on behalf of]:

Print name:

Date: