SCOTTISH STATUTORY INSTRUMENTS

2026 No. 37

NATIONAL HEALTH SERVICE

The National Health Service (General Medical Services Contracts and Primary Medical Services Section 17C Agreements) (Miscellaneous Amendment) (Scotland) Regulations 2026

Made - - - -	*28th January 2026*
Laid before the Scottish Parliament	*30th January 2026*
Coming into force - -	*14th March 2026*

The Scottish Ministers make the following Regulations in exercise of the powers conferred by sections 9(6), 17E, 17N and 105(7)(a) of the National Health Service (Scotland) Act 1978(**a**) and all other powers enabling them to do so.

Citation and commencement

1. These Regulations may be cited as the National Health Service (General Medical Services Contracts and Primary Medical Services Section 17C Agreements) (Miscellaneous Amendment) (Scotland) Regulations 2026 and come into force on 14 March 2026.

Amendments to the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018

2. The National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018(**b**) are amended in accordance with regulations 3 to 6.

3. In regulation 3(1) (interpretation), in the definition of "community treatment and care"(**c**), for "syringing", substitute "wax management".

4. In regulation 18A (Health Board support for contractors)(**d**)—

(**a**) 1978 c. 29 ("the Act"). Section 9 was amended by section 29(5) of the National Health Service and Community Care Act 1990 (c. 19) and paragraph 43 of schedule 4 of the Health Act 1999 (c. 8) ("1999 Act"). Section 17E was inserted by section 22(2) of the National Health Service (Primary Care) Act 1997 (c. 46) and was amended by section 65 and schedules 4 and 5 of the 1999 Act, section 2(4) of the Primary Medical Services (Scotland) Act 2004 (asp 1) ("2004 Act") and S.I. 2003/1250. Section 17N was inserted by section 4 of the 2004 Act. Section 105(7) was amended by section 25(3), paragraph 5 of schedule 6 and schedule 7 of the Health Services Act 1980 (c. 53), section 29 and paragraph 24 of schedule 9 of the Health and Social Services and Social Security Adjudications Act 1983 (c. 41) and section 65 and paragraph 60 of schedule 4 of the 1999 Act. For the purposes of sections 9(6) and 17N of the Act, "prescribed" means prescribed by regulations made by the Secretary of State under the Act and is defined in section 108(1). Section 108(1) also contains a definition of "regulations" relevant to the exercise of the statutory powers under which these Regulations are made. The functions of the Secretary of State, in so far as exercisable within devolved competence, were transferred to the Scottish Ministers by virtue of section 53 of the Scotland Act 1998 (c. 46).

(**b**) S.S.I. 2018/66, relevantly amended by S.S.I. 2021/302 and S.S.I. 2022/130.

(**c**) The definition of "community treatment and care" was inserted by S.S.I. 2022/130.

(**d**) Regulation 18A was inserted by S.S.I. 2022/130.

(a) for paragraph (1) substitute—

"(1) A contract must include terms which have the same effect as schedules 2B (community treatment and care services) and 2C (pharmacotherapy services).", and

(b) omit paragraph (2).

5. After schedule 2A (vaccination services)(**a**) insert—

"SCHEDULE 2B

Regulation 18A(1)

Community treatment and care services

1.—(1) The Health Board must provide the contractor with support by providing community treatment and care services.

(2) The Health Board must act in accordance with any directions given by the Scottish Ministers in relation to the extent and manner of the community treatment and care services which it must provide in terms of sub-paragraph (1).

(3) Subject to the following provisions of this paragraph, where the Health Board is satisfied that by reason of distance, inadequacy of means of communication, or other exceptional circumstances, the Health Board will have serious difficulties in providing the community treatment and care services which it must provide in terms of sub-paragraph (1), or part of those services, to the contractor's patients, the Health Board may agree with the contractor that the contractor will provide those community treatment and care services or a specific part of those services ("agreed CTAC services"), to their patients, from a specified date.

(4) The Health Board must, after reaching agreement with the contractor under sub-paragraph (3), serve notice on the contractor, which notice must—

(a) list the agreed CTAC services, and

(b) set out the date from which the contractor will provide those services.

(5) No notice may be served under sub-paragraph (4) unless the Health Board has first consulted the area medical committee regarding the matter.

(6) In the event that either the Health Board or the contractor wishes the notice served under sub-paragraph (4) to be withdrawn, the Health Board will withdraw the notice and the contractor will cease to provide the agreed CTAC services to its patients—

(a) within a timescale agreed between the Health Board and the contractor, or

(b) after a period of 6 months from withdrawal of the notice,

whichever date is earlier.

(7) Where the contractor is to cease to provide the agreed CTAC services to its patients, the contractor must comply during core hours with any reasonable request from the Health Board for information in relation to the provision by the contractor of the agreed CTAC services.

(8) The Health Board must comply with any directions given by the Scottish Ministers in relation to the matters provided for in sub-paragraph (3).

(**a**) Schedule 2A was inserted by S.S.I. 2021/302.

SCHEDULE 2C

Regulation 18A(1)

Pharmacotherapy services

1.—(1) The Health Board must provide the contractor with support by providing pharmacotherapy services.

(2) The Health Board must act in accordance with any directions given by the Scottish Ministers in relation to the extent and manner of the pharmacotherapy services which it must provide in terms of sub-paragraph (1).

(3) Subject to the following provisions of this paragraph, where the Health Board is satisfied that by reason of distance, inadequacy of means of communication, or other exceptional circumstances, the Health Board will have serious difficulties in providing the pharmacotherapy services which it must provide in terms of sub-paragraph (1), or part of those services, to the contractor's patients, the Health Board may agree with the contractor that the contractor will provide those pharmacotherapy services or a specific part of those services ("agreed pharmacotherapy services"), to their patients, from a specified date.

(4) The Health Board must, after reaching agreement with the contractor under sub-paragraph (3), serve notice on the contractor, which notice must—

(a) list the agreed pharmacotherapy services, and

(b) set out the date from which the contractor will provide those services.

(5) No notice may be served under sub-paragraph (4), unless the Health Board has first consulted the area medical committee regarding the matter.

(6) In the event that either the Health Board or the contractor wishes the notice served under sub-paragraph (4) to be withdrawn, the Health Board will withdraw the notice and the contractor will cease to provide the agreed pharmacotherapy services to its patients—

(a) within a timescale agreed between the Health Board and the contractor, or

(b) after a period of 6 months from withdrawal of the notice,

whichever date is earlier.

(7) Where the contractor is to cease to provide the agreed pharmacotherapy services to its patients, the contractor must comply during core hours with any reasonable request from the Health Board for information in relation to the provision by the contractor of the agreed pharmacotherapy services.

(8) The Health Board must comply with any directions given by the Scottish Ministers in relation to the matters provided for in sub-paragraph (3).".

6. In schedule 6 (other contractual terms)—

(a) for paragraph 10A (duty to co-operate with Health Board support for contractors)(**a**), substitute—

"**10A.** Where a Health Board is providing support to a contractor under paragraph 1(1) of schedule 2B (community treatment and care services) or paragraph 1(1) of schedule 2C (pharmacotherapy services), the contractor must—

(a) co-operate with the Health Board to allow the Health Board to provide, in the case of support provided under paragraph 1(1) of—

(i) schedule 2B, community treatment and care services, and

(ii) schedule 2C, pharmacotherapy services,

(b) comply in core hours with any reasonable request for information from the Health Board to the contractor in relation to such service provision, and

(c) provide to its patients any aspect of—

(**a**) Paragraph 10A was inserted by S.S.I. 2022/130.

(i) community treatment and care services which the Health Board is to provide under paragraph 1(1) of schedule 2B, and

(ii) pharmacotherapy services which the Health Board is to provide under paragraph 1(1) of schedule 2C,

if the patient requires the services immediately to prevent injury or worsening of their clinical condition and Health Board provision is not immediately available.", and

(b) in paragraph 54(2)(b) (training)(**a**), for "regulation 18A (Health Board support for contractors)" substitute "paragraph 1(1) of schedule 2B (community treatment and care services) or paragraph 1(1) of schedule 2C (pharmacotherapy services)".

Amendments to the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018

7. The National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018(**b**) are amended in accordance with regulations 8 and 9.

8. In regulation 3(1) (interpretation), in the definition of "community treatment and care"(**c**), for "syringing", substitute "wax management".

9.—(1) Schedule 1 (content of agreements) is amended in accordance with paragraphs (2) to (5).

(2) In paragraph 6A (Health Board support for providers)(**d**)—

(a) for the heading, substitute "Health Board support for providers: community treatment and care services",

(b) in sub-paragraph (1), omit "and pharmacotherapy services",

(c) for sub-paragraph (2), substitute—

"(2) The Health Board must act in accordance with any directions given by the Scottish Ministers in relation to the extent and manner of the community treatment and care services which it must provide in terms of sub-paragraph (1).",

(d) omit sub-paragraph (3), and

(e) after sub-paragraph (3), insert—

"(4) Subject to the following provisions of this paragraph, where the Health Board is satisfied that by reason of distance, inadequacy of means of communication, or other exceptional circumstances, the Health Board will have serious difficulties in delivering the community treatment and care services which it must provide in terms of sub-paragraph (1), or part of those services, to the provider's patients, the Health Board may agree with the provider that the provider will provide those community treatment and care services or a specific part of those services ("agreed CTAC services"), to their patients, from a specified date.

(5) The Health Board must, after reaching agreement with the provider under sub-paragraph (4), serve notice on the provider, which notice must—

(a) list the agreed CTAC services, and

(b) set out the date from which the provider will provide those services.

(6) No notice may be served under sub-paragraph (5) unless the Health Board has first consulted the area medical committee regarding the matter.

(**a**) Paragraph 54(2) was inserted by S.S.I. 2022/130.
(**b**) S.S.I. 2018/67, relevantly amended by S.S.I. 2022/130.
(**c**) The definition of "community treatment and care" was inserted by S.S.I. 2022/130.
(**d**) Paragraph 6A was inserted by S.S.I. 2022/130.

(7) In the event that either the Health Board or the provider wishes the notice served under sub-paragraph (5) to be withdrawn, the Health Board will withdraw the notice and the provider will cease to provide the agreed CTAC services to its patients—

(a) within a timescale agreed between the Health Board and the provider, or

(b) after a period of 6 months from withdrawal of the notice,

whichever date is earlier.

(8) Where a provider ceases to provide the agreed CTAC services under sub-paragraph (7), the provider must comply with any reasonable request made by the Health Board for information relating to the provision by the provider of the agreed CTAC services.

(9) The Health Board must comply with any directions given by the Scottish Ministers in relation to the matters provided for in sub-paragraph (4).".

(3) After paragraph 6A insert—

"Health Board support for providers: pharmacotherapy services

6B.—(1) The Health Board must provide the provider with support by providing the pharmacotherapy services.

(2) The Health Board must act in accordance with any directions given by the Scottish Ministers in relation to the extent and manner of the pharmacotherapy services which it must provide in terms of sub-paragraph (1).

(3) Any support which the provider receives from a pharmacist independent prescriber supplied by the Health Board in connection with dispensing services which the provider provides (under paragraph 16 of this schedule) is not to be treated as the provision of pharmacotherapy services.

(4) Subject to the following provisions of this paragraph, where the Health Board is satisfied that by reason of distance, inadequacy of means of communication, or other exceptional circumstances, the Health Board will have serious difficulties in delivering the pharmacotherapy services which it must provide in terms of sub-paragraph (1), or part of those services, to the provider's patients, the Health Board may agree with the provider that the provider will deliver those pharmacotherapy services or a specific part of those services ("agreed pharmacotherapy services"), to their patients, from a specified date.

(5) The Health Board must, after reaching agreement with the provider under sub-paragraph (4), serve notice on the provider, which notice must—

(a) list the agreed pharmacotherapy services, and

(b) set out the date from which the provider will provide those services.

(6) No notice may be served under sub-paragraph (5) unless the Health Board has first consulted the area medical committee regarding the matter.

(7) In the event that either the Health Board or the provider wishes the notice served under sub-paragraph (5) to be withdrawn, the Health Board will withdraw the notice and the provider will cease to provide the agreed pharmacotherapy services to its patients—

(a) within a timescale agreed between the Health Board and the provider, or

(b) after a period of 6 months from withdrawal of the notice,

whichever date is earlier.

(8) Where a provider ceases to provide the agreed pharmacotherapy services under sub-paragraph (7), the provider must comply with any reasonable request made by the Health Board for information relating to the provision by the provider of the agreed pharmacotherapy services.

(9) The Health Board must comply with any directions given by the Scottish Ministers in relation to the matters provided for in sub-paragraph (4).".

(4) For paragraph 8A (duty of co-operation with Health Board support for providers)(**a**), substitute—

"**8A.** Where a Health Board is providing support under paragraph 6A(1) (Health Board support for providers: community treatment and care services) or paragraph 6B(1) (Health Board support for providers: pharmacotherapy services), the provider must—

(a) co-operate with the Health Board to allow the Health Board to provide, in the case of support provided under—

(i) paragraph 6A(1), community treatment and care services, and

(ii) paragraph 6B(1), pharmacotherapy services,

to the provider's patients,

(b) comply in core hours with any reasonable request for information from the Health Board to the provider in relation to such support, and

(c) provide to its patients any aspect of—

(i) community treatment and care services which the Health Board is to provide under paragraph 6A(1), and

(ii) pharmacotherapy services which the Health Board is to provide under paragraph 6B(1),

if the patient requires the services immediately to prevent injury or worsening of their clinical condition and Health Board provision is not immediately available.".

(5) In paragraph 26(2)(b) (training)(**b**), for "paragraph 6A (Health Board support for providers)", substitute "paragraph 6A(1) (Health Board support for providers: community treatment and care services) or paragraph 6B(1) (Health Board support for providers: pharmacotherapy services)".

NEIL GRAY
A member of the Scottish Government

St Andrew's House,
Edinburgh
28th January 2026

(**a**) Paragraph 8A was inserted by S.S.I. 2022/130.
(**b**) Paragraph 26 was amended by S.S.I. 2022/130.

EXPLANATORY NOTE

(This note is not part of the Regulations)

The National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018 ("GMS Regulations") set out the framework for general medical services contracts into which Health Boards may enter under section 17J of the National Health Service (Scotland) Act 1978 ("1978 Act"). Regulations 2 to 6 of these Regulations make the following changes of substance to the GMS Regulations in relation to the provision of community treatment and care ("CTAC") services and pharmacotherapy services.

Regulation 4 amends regulation 18A of the GMS Regulations to refer to new schedules 2B and 2C. Schedules 2B and 2C are inserted into the GMS Regulations by regulation 5. Schedule 2B, paragraph 1(1) and (2), requires the Health Board to provide the contractor with support by providing CTAC services, acting in accordance with any directions given by the Scottish Ministers in relation to the extent and manner of that provision. Sub-paragraph (3) of schedule 2B enables a Health Board and a contractor to agree that where the Health Board is satisfied that by reason of distance, inadequacy of means of communication, or other exceptional circumstances, the Health Board will have serious difficulties in providing the CTAC services which it must provide in terms of sub-paragraph (1), or part of those services, to the contractor's patients, the contractor will provide the agreed services to their patients from a specified date. Sub-paragraph (4) requires the Health Board, after reaching agreement with the contractor under sub-paragraph (3), to serve notice on the contractor, listing the agreed CTAC services and setting out the date from which the contractor will provide those services. Sub-paragraph (5) requires the Health Board to consult the area medical committee before serving notice. Sub-paragraphs (6) and (7) make provision in relation to the contractor ceasing to provide the agreed CTAC services. Sub-paragraph (8) requires the Health Board to comply with any directions given by the Scottish Ministers in relation to the matters provided for in sub-paragraph (3). Schedule 2C makes equivalent provision to that made by schedule 2B, in respect of the provision of pharmacotherapy services. Regulation 6 amends schedule 6 of the GMS Regulations by substituting a new paragraph 10A and amending paragraph 54(2)(b) to reflect the new provisions.

The National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018 ("PMS Regulations") set out the framework for primary medical services agreements which Health Boards may make under section 17C of the 1978 Act. Regulations 7 to 9 of these Regulations make the following changes of substance to the PMS Regulations in relation to the provision of CTAC services and pharmacotherapy services.

Regulation 9 amends schedule 1 of the PMS Regulations. Paragraph 6A is amended to remove reference to pharmacotherapy services, for which separate provision is now made in new paragraph 6B. New paragraph 6A(2) and (4) to (9) make equivalent provision in the PMS Regulations to that made by new schedule 2B, paragraph 1(2) to (8) of the GMS Regulations. Paragraph 6B is inserted into schedule 1 to make separate provision in relation to pharmacotherapy services, equivalent to that made by new schedule 2C of the GMS Regulations. A new paragraph 8A is substituted and paragraph 26(2)(b) is amended to reflect the new provisions.

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£8.90

http://www.legislation.gov.uk/id/ssi/2026/37

ISBN 978-0-11-106539-6

