NATIONAL HEALTH SERVICE, ENGLAND

The General Medical Services Statement of Financial Entitlements (Amendment) Directions 2018

The Secretary of State for Health and Social Care gives the following directions as to payments to be made under general medical services contracts in exercise of the powers conferred by sections 87, 272(7) and (8) and 273(1) of the National Health Service Act 2006.(a).

In accordance with section 87(4) of that Act, the Secretary of State for Health and Social Care has consulted the body appearing to the Secretary of State to be representative of persons to whose remuneration these Directions relate and has consulted such other persons as the Secretary of State considers appropriate.

PART I
General

Citation and commencement

1. (1) These Directions may be cited as the General Medical Services Statement of Financial Entitlements (Amendment) Directions 2018.

(2) They come into force on 1st April 2018.

Interpretation

2. In these Directions, “the principal Directions” means the General Medical Services Statement of Financial Entitlements Directions 2013(b).

(a) 2006 (c.41); section 87 of the National Health Service Act 2006 (“the 2006 Act”) was amended by section 55 of, and paragraph 33 of Schedule 4 to, the Health and Social Care Act 2012 (c.7) (“the 2012 Act”). By virtue of section 271(1) of the 2006 Act, the powers conferred by these sections are exercisable by the Secretary of State only in relation to England. Section 273 of the 2006 Act was amended by section 21(6), 47(7) and 55(1) of, and paragraph 137 of Schedule 4 to, the 2012 Act.

(b) Those Directions were signed on 27th March 2013 and were amended by the General Medical Services Statement of Financial Entitlements (Amendment) Directions 2013 which were signed on 18th September 2013; the General Medical Services Statement of Financial Entitlements (Amendment) Directions 2014 which were signed on 28th March 2014; the General Medical Services Statement of Financial Entitlements (Amendment No.2) Directions 2014 which were signed on 30th September 2014, the General Medical Services Statement of Financial Entitlements (Amendment Directions 2015 which were signed on 23rd March 2015; the General Medical Services Statement of Financial Entitlements (Amendment No.2) Directions 2015 which were signed on 28th September 2015; the General Medical Services Statement of Financial Entitlements (Amendment No.3) Directions 2015 which were signed on 6th October 2015; the General Medical Services Statement of Financial Entitlements (Amendment No.4) Directions 2015 which were signed on 4th December 2015; the General Medical Services Statement of Financial Entitlements (Amendment) Directions 2016 which were signed on 31st March 2016; the General Medical Services Statement of Financial Entitlements (Amendment No.2) Directions 2016 which were signed on 9th May 2016; the General Medical Services Statement of Financial Entitlements (Amendment No.3) Directions 2016 which were signed on 24th November 2016; the General Medical Services Statement of Financial Entitlements (Amendment) Regulations 2017 which were signed on 31st March 2017 and the General Medical Services Statement of Financial Entitlements (Amendment) (No.2) Directions 2017 which were signed on 30th October 2017. Copies are available at: https://www.gov.uk/government/publications/nhs-primary-medical-services-directions-2013 and from the Department of Health and Social Care, 4th Floor, 39 Victoria Street, London SW1H 0EU.
PART 2

Amendment of Part 1 of the principal Directions (global sum and minimum income practice guarantee)

Amendment of Section 2 of the principal Directions

3. In Section 2 of the principal Directions (global sum payments)—
   (a) in paragraph 2.3 (calculation of a contractor’s first Initial Global Sum Monthly Payment), for “£85.35” substitute “£87.92”;
   (b) in paragraph 2.5 (calculation of Adjusted Global Sum Monthly Payments), in column 2 of Table 1 (percentage of initial GSMP), for “4.92” substitute “4.87”; and
   (c) at the end of paragraph 2.18 (Contractor Population Index) insert “For the financial year ending 31st March 2019, the national average practice population figure is 8,096.”(a).

PART 3

Amendment of Part 2 of the principal Directions (Quality and Outcomes Framework)

Amendment of section 4 of the principal Directions

4. In Section 4 of the principal Directions (general provisions relating to the quality and outcomes framework)—
   (a) in paragraph 4.3 (background), for “1st April 2017” substitute “1st April 2018”;
   (b) in paragraph 4.19 (thresholds), for “the financial year commencing on 1st April 2017 and ending on 31st March 2018” substitute “the financial year commencing on 1st April 2018 and ending on 31st March 2019”; and
   (c) in paragraph 4.20 (thresholds), for “1st April 2017 to 31st March 2018” substitute “1st April 2018 to 31st March 2019”.

Amendment of Section 5 of the principal Directions

5. In Section 5 of the principal Directions (aspiration payments: calculation, payment arrangements and conditions of payments)—
   (a) at the end of paragraph 5.6 (calculation of Monthly Aspiration Payments: the 70% method) insert “For the purposes of calculating the CPI, the national average practice population figure for the financial year ending 31st March 2019 is 8,096”(b); and
   (b) in paragraph 5.13 (calculation of monthly aspiration payments: the aspiration points total method), for “£171.20” substitute “£179.26”.

Amendment of Section 6 of the principal Directions

6. In Section 6 of the principal Directions (achievement payments: calculation, payment, arrangements and conditions of payment)—
   (a) in paragraphs 6.6, 6.8 and 6.9 (calculation of achievement payments), for “£171.20” substitute “£179.26”; and
   (b) in paragraph 6.7 (calculation of achievement payments), for “£165.18” substitute “£171.20”.

(a) This national average practice population figure is taken from the Calculating Quality Reporting Service (CQRS) on 1st January 2018.
(b) The national average practice population figure is taken from the Calculating Quality Reporting Service (CQRS) on 1st January 2018.
PART 4
Amendment of Part 3 of the principal Directions (Directed Enhanced Services)

Amendment of Section 7 of the principal Directions

7. In Section 7 of the principal Directions (extended hours access scheme for the period 1st April 2017 to 31st March 2018)—
(a) in the heading, for “1st APRIL 2017 TO 31st MARCH 2018” substitute “1st APRIL 2018 TO 31st MARCH 2019”;
(b) in paragraph 7.1, for the words “In this Section, “financial year” means the period commencing on 1st April 2017 and ending on 31st March 2018” substitute “In this Section, “financial year” means the period commencing 1st April 2018 and ending on 31st March 2019”;
(c) in paragraph 7.2 (extended hours access scheme - payments), for “31st March 2018” in sub-paragraph (a), substitute “31st March 2019”; and
(d) in paragraph 7.7 (extended hours access scheme – payments), for “31st March 2018” substitute “31st March 2019”.

Amendment of Section 9 of the principal Directions

8. In Section 9 of the principal Directions (learning disabilities health check scheme for the period 1st April 2017 to 31st March 2018)—
(a) in the heading, for “1st APRIL 2017 TO 31st MARCH 2018” substitute “1st APRIL 2018 TO 31st MARCH 2019”;
(b) in paragraph 9.1, for the words “In this Section, “financial year” means the period commencing on 1st April 2017 and ending on 31st March 2018” substitute “In this Section, “financial year” means the period commencing 1st April 2018 and ending on 31st March 2019”;
(c) in paragraph 9.5 (learning disabilities health check scheme – the register), for “31st March 2017” substitute “31st March 2018”;
(d) in paragraph 9.10 (learning disabilities health check scheme – the register), for “31st March 2018” substitute “31st March 2019”; and
(e) in paragraph 9.15 and its heading (provisions relating to contractors whose contracts terminate or who withdraw arrangements prior to 31st March 2018 (subject to the provisions below for terminations attributable to a practice split or merger)), for “31st March 2018” in each place where it appears substitute “31st March 2019”.

Amendment of Section 11 of the principal Directions

9. In Section 11 of the principal Directions (childhood immunisations)—
(a) in paragraph 11.10 (calculation of quarterly two-year-olds immunisation payment)—
   (i) for “A x £632.11” in sub-paragraph (a), substitute “A x £553.22”,
   (ii) for “A x £1,896.82” in sub-paragraph (b), substitute “A x £1,659.66”,
   (iii) for “63”, in each place where it appears, substitute “61”; and
(b) in paragraph 11.20 (calculation of quarterly five-year-olds immunisation payments), for “63” in each place where it appears substitute “64”.
Amendment of Section 12 of the principal Directions

10. In Section 12 of the principal Directions (rotavirus vaccine), in paragraph 12.3 (payment for administration of rotavirus vaccine), for “£9.80” substitute “£10.06”.

PART 5

Amendment of Part 4 of the principal Directions (payments for specific purposes)

Amendment of Section 14 of the principal Directions

11. In Section 14 of the principal Directions (shingles immunisation programme)—
(a) in paragraph 14.2 (payment for administration of the Shingles vaccine)—
   (i) for “£9.80” substitute “£10.06”,
   (ii) for “the financial year ending 31st March 2018” in sub-paragraph (b), substitute “the financial year ending 31st March 2019”; and
(b) in paragraph 14.5 (eligibility for payment), for “£9.80” substitute “£10.06”.

Amendment of Section 14A of the principal Directions

12. In Section 14A of the principal Directions (MMR vaccination for persons aged 16 and over) in paragraph 14A.2, for “£9.80” substitute “£10.06”.

Amendment of Section 14B of the principal Directions

13. In Section 14B (at risk babies)—
(a) for the heading, substitute “Hepatitis B (at risk newborn babies); and
(b) in paragraph 14B.2 (at risk babies), for “£9.80” substitute “£10.06”.

Amendment of Section 14 of the principal Directions

14. In Section 14C of the principal Directions (HPV completing dose), in paragraph 14C.2, for “£9.80” substitute “£10.06”.

Amendment of Section 14D of the principal Directions

15. In Section 14D of the principal Directions (Meningococcal completing dose)—
(a) in paragraphs 14.D1, 14D.2 and 14D.7, for “Meningococcal C containing vaccine” in each place where it appears substitute “Meningococcal completing dose”;
(b) in paragraph 14D.1, for “1st April 2015” substitute “1st April 2012”; and
(c) in paragraph 14D.2, for “£9.80” substitute “£10.06”.

Insertion of new Section 14E into the principal Directions

16. After Section 14D of the principal Directions (Meningococcal Completing Dose), insert—

“Section 14E: MENINGOCOCCAL B (INFANT) VACCINATION PROGRAMME

14E.1. This Section makes provision for payments to be made in respect of the administration by a contractor, which is contracted to provide vaccines and immunisations as part of Additional Services, of the Meningococcal B vaccine as part of the recommended routine childhood immunisation Schedule.”
14E.2.1. References in this Section to the age of a child expressed in weeks and or months. Reference to months is calendar months. A reference made to a vaccine being administered at or around a certain age in this Section, is an indication of the recommended schedule for administration of the vaccine as contained in Immunisation against Infectious Diseases – The Green Book which can be found at: https://www.gov.uk/government/publications/meningococcal-the-green-book-chapter-22

14E.2.2. Specific timing of the administration of the Meningococcal B vaccine, which should be within the parameters of the recommended childhood immunisation Schedule, is a matter for the clinical judgement of the relevant health care professional.

Payment for administration of Meningococcal B vaccine

14E.3. The Board must pay a contractor who qualifies for the payment, a payment of £10.06 in respect of –

(a) each child registered with the contractor;
(b) who is born on or after 1st May 2015 and has not attained the age of two years at the time of vaccination;
(c) who has received a dose of Meningococcal B vaccine as part of their routine childhood immunisation schedule as set out in the table below:

<table>
<thead>
<tr>
<th>When to immunise</th>
<th>How vaccine is given</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 weeks</td>
<td>One injection</td>
</tr>
<tr>
<td>16 weeks</td>
<td>One injection</td>
</tr>
<tr>
<td>One year old (on or after the child’s first birthday)</td>
<td>One injection</td>
</tr>
</tbody>
</table>

14E.4.1. This paragraph applies where the vaccine status of the child is incomplete and the contractor vaccinates the child by giving –

(a) in the case of a child who has attained the age of 2 months but has not yet attained the age of one year, a total of two doses of the Meningococcal B vaccine given 2 months apart. (These doses can be given one month apart if necessary to ensure the two dose primary Meningococcal B immunisation schedule is completed before the child attains one year of age (i.e. if schedule started at 10 months of age). The booster dose should then be given when the child attains one year of age (on or after the child’s first birthday) as per the routine Schedule); or
(b) in the case of a child who has attained one year of age but has not yet attained the age of two years and less than two doses of Meningococcal B vaccine have been given to the child when under one year of age, two doses of Meningococcal B vaccine to the child two months apart. (Doses of Meningococcal B vaccine can be given one month apart if necessary to ensure this two dose schedule is completed before the child’s birthday (i.e. if schedule started at 22 months of age)).

14E.4.2. Where paragraph 14E.4.1 applies, the Board must pay the contractor in accordance with paragraph 14E.3.

14E.5.1. This paragraph applies where the vaccine status of the child is unknown and the contractor vaccinates the child by giving –

(a) in the case of a child who has attained the age of 2 months but who has not yet attained the age of one year, a total of two doses of Meningococcal B vaccine 2 months apart. (These doses can be given one month apart if necessary to ensure the two dose primary Meningococcal B immunisation schedule is completed before the child attains one year of age (i.e. if schedule started at 10 months of age). The
booster dose should then be given when the child attains one year of age (on or after the child’s first birthday) as per the routine schedule; or

(b) in the case of a child who has attained one year of age but who has not yet attained the age of 2 years and two doses of Meningococcal B vaccine have been given to the child when under one year of age, two doses of Meningococcal B vaccine to the child two months apart. (Doses of Meningococcal B vaccine can be given one month apart if necessary to ensure this two dose schedule is completed before the child’s second birthday (i.e. if schedule started at 22 months of age)).

14E.5.2. Where paragraph 14E.5.1 applies, the Board must pay the contractor in accordance with paragraph 14E.3.

14E.6. Meningococcal B vaccine is not routinely indicated after the second birthday.

Eligibility for payment

14E.7. A contractor is only eligible for a payment under this Section in circumstances where the following conditions are met—

(a) the contractor is contracted to provide the childhood vaccines and immunisations as part of Additional Services;

(b) the child in respect of whom the payment is claimed was on the contractor’s list of registered patients at the time the Meningococcal B vaccine was administered and all the following apply;

(c) the child in respect of whom payment is being claimed were within the cohort as identified in Section 14E.3(b) at the time the Meningococcal B vaccine was administered;

(d) the contractor administered the vaccine to the child in respect of whom the payment is claimed;

(e) the contractor does not receive any payment from any other source in respect of the Meningococcal B vaccine (if the contractor does receive any such payment in respect of any child from any other source, the Board must give serious consideration to recovering any payment made under this Section in respect of that patient pursuant to paragraphs 25.1 and 25.2 (overpayments and withheld amounts); and

(f) the contractor submits the claim for payment within 6 months of administering the Meningococcal B vaccine.

Claims for payment

14E.8.1. The contractor must submit any claims in respect of the administration of the Meningococcal B vaccine after the dose has been administered at a frequency to be agreed between the Board and the contractor (which must be a frequency which provides for the claim to be submitted within 6 months of administering the vaccination), or if agreement cannot be reached, before the end of the period of 14 days from the end of the month during which the vaccine was administered. Any amount payable falls due on the next date, following the expiry of the period of 14 days from the date on which the claim is submitted, when the contractor’s Payable GSMP falls due.

14E.8.2. The Board must ensure that the receipt and payment in respect of any claims are properly recorded and that each such claim has a clear audit trail.

Conditions attached to payment

14E.9. A payment under the provisions of this Section is only payable if the contractor satisfies the following conditions—
(a) the contractor must supply the Board with the following information in respect of each child for which a payment is claimed—
   (i) the name of the child;
   (ii) the date of birth of the child;
   (iii) the NHS number, where known, of the child;
   (iv) except where paragraph (v) applies, confirmation that the child has received the doses of the Meningococcal B vaccine in accordance with the table at paragraph 14E.2;
   (v) if the claim is made in the circumstances set out in paragraph 14E.7, confirmation that all required vaccines have been administered; and
   (vi) the date of the final completing dose of the vaccine, which must have been administered by the contractor,

   but where a parent or carer objects to details of the child’s name or date of birth being supplied to the Board, the contractor need not supply such information to the Board but must supply the child’s NHS number;

(b) the contractor must provide appropriate information and advice to the parent or carer of the child;

(c) the contractor must record in the child’s records, kept in accordance with regulation 67 of the 2015 Regulations, any refusal of an offer of the Meningococcal B vaccine;

(d) where the Meningococcal B vaccine is administered, the contractor must record in the child’s records, kept in accordance with regulation 76 of the 2015 Regulations, those matters set out in paragraph 4(2)(e) of Schedule 1 to the 2015 Regulations;

(e) the contractor must ensure that any health care professional who performs any clinical service in connection with the administration of the Meningococcal B vaccine has such clinical experience and training as is necessary to enable that health care professional to properly perform such services and that any such health care professional is trained in the recognition and initial treatment of anaphylaxis;

(f) the contract must make available to the Board any information which the Board does not have but needs, and the contractor either has or could be reasonably expected to obtain, in order to form its opinion on whether the contractor is eligible for payment under the provisions of this Section;

(g) the contractor must make any returns required of it (whether computerised or otherwise) to the Exeter Registration System, and do so promptly and fully; and

(h) all information provided pursuant to or in accordance with this paragraph must be accurate.

14E.10. If the contractor breaches any of these conditions, the Board may, in appropriate circumstances, withhold payment of any, or any part of, the payment due under this Section.”.

Amendment of Section 15 of the principal Directions

17. In Section 15 of the principal Directions (payments for GP performers covering maternity, paternity and adoption leave)—

(a) in paragraph 15.2 (general), after the words “employ a locum” insert “or a salaried GP under a fixed term contract”;

(b) in section 15.4 (entitlement to payments for covering ordinary or additional maternity, paternity and ordinary or additional adoption leave), after the words “a locum” in each place where they appear insert “or a salaried GP on a fixed term contract”;

(c) in paragraph 15.5 (amounts payable)—
(i) in paragraph (1), for “locum cover” in each place where it appears substitute “cover”,
(ii) for “£1,131.74 per week” in sub-paragraph (a), substitute “£1,143.06 per week”, and
(d) for £1,734.18 per week” in sub-paragraph (b), substitute “£1,751.52 per week”.

Amendment of Section 16 of the principal Directions

18. In Section 16 of the principal Directions (payments for locums or GP performers covering sickness leave)—
(a) in Section 16.2 (general)—
   (i) after the words “employ a locum” in the first place where they appear insert “, or a salaried GP on a fixed term contract”, and
   (ii) for those words in the second place where they appear substitute “to provide cover”,
(b) in Section 16.3 (entitlement to payments for covering sickness leave)—
   (i) after the word “locum” where it first appears, insert “or a salaried GP on a fixed term contract”,
   (ii) in paragraph (c)—
      (aa) after the words “engaging a locum” insert “or salaried GP on a fixed term contract”, and
      (bb) for the words “cost of the locum” in each place where they appear substitute “cost of cover”,
   (iii) in paragraph (e) omit “locum”, and
   (iv) for the word “locum” in the final sentence substitute “cover”;
(c) in Section 16.5 (ceilings on the amounts payable), for “£1,734.18 per week” substitute “£1,751.52 per week”;
(d) in Section 16.8 (ceilings on amounts payable), omit “locum”;
(e) in Section 16.10—
   (i) in paragraph (a), after “locum” insert “or salaried GP on a fixed term contract” and for “locum cover” substitute “cover”,
   (ii) in paragraphs (b) and (c), for “locum cover” substitute “cover”,
   (iii) in paragraph (d), for “locum arrangements” in each place where it appears substitute “arrangements for cover” and for “locum cover” substitute “cover”, and
   (iv) in paragraph (e), for “locum arrangements” substitute “arrangements for cover”.

Amendment of Section 19 of the principal Directions

19. In Section 19 of the principal Directions (seniority payments), for the table in paragraph 19.12 (calculation of full annual rate of Seniority Payments), substitute—

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<th>Years of reckonable service</th>
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<th>Full annual rate of payment per practitioner from 1st April 2018</th>
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<td>£9,193.17</td>
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</tr>
</tbody>
</table>
PART 6
Amendment of Annex A (Glossary) and Annex B (Global Sum)

Amendment of Part 2 of Annex A

20. In Part 2 of Annex A (definitions), for the definition of “DES Directions” substitute—

“DES Directions” means the Primary Medical Services (Directed Enhanced Services Directions) 2018 signed on 29th March 2018;”.

Amendment to Annex B to the principal Directions

21. In Annex B to the principal Directions (global sum), in Part 2 (vaccines and immunisations), in Table 1—

(a) in the fifth entry in column 1 (vaccines and immunisation in respect of diseases), for “Meningococcal C containing vaccine” substitute “Meningococcal Completing Dose”; and

(b) in sub-paragraph (c) of the fifth entry in column 2 (circumstances in which vaccines or immunisation is to be offered and given), for “period commencing 1st April 2017 and ending 31st March 2018” substitute “period commencing 1st April 2018 and ending 31st March 2019”;

Amendment of Annex D to the principal Directions

22. In Annex D to the principal Directions (quality and outcomes framework)—

(a) in paragraph D.2 (general) for “the financial year commencing on 1st April 2017 and ending on 31st March 2018” substitute “for the financial year commencing on 1st April 2018 and ending on 31st March 2019”;

(b) in Section 2.1 (summary of QOF indicators)—

(i) in the Table headed Diabetes mellitus (DM), omit the words “NICE 2010 menu ID: NM14”, and

(ii) in the Table headed Learning disability (LD), for “LD003” substitute “LD004”;

(c) in Section 2.2.1 (public health domain)—

(i) in the Table headed Cardiovascular disease – primary prevention (CVD-PP), omit “NICE 2011 menu ID: NM26”, and

(ii) in the Table headed Obesity (OB), omit the words “NICE 2014 menu ID: NM85”.

Amendment of Annex I to the principal Directions

23. In Annex I to the principal Directions (routine childhood vaccines and immunisations), in paragraph 1.2 (routine childhood immunisation Schedule) for the Table substitute—

<table>
<thead>
<tr>
<th>Age</th>
<th>Vaccine</th>
<th>Dosage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two months old</td>
<td>Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b, hepatitis B (DTaP/IPV/Hib/HepB)</td>
<td>One injection</td>
</tr>
<tr>
<td></td>
<td>Pneumococcal (PCV)</td>
<td>One injection</td>
</tr>
<tr>
<td></td>
<td>Rotavirus (Rota)</td>
<td>One oral dose</td>
</tr>
<tr>
<td></td>
<td>Meningococcal B</td>
<td>One injection</td>
</tr>
<tr>
<td>Age</td>
<td>Vaccines</td>
<td>Administration</td>
</tr>
<tr>
<td>---------------------</td>
<td>--------------------------------------------------------------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Three months old</td>
<td>Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b, hepatitis B (DTaP/IPV/Hib/HepB)</td>
<td>One injection</td>
</tr>
<tr>
<td></td>
<td>Rotavirus (Rota)</td>
<td>One oral dose</td>
</tr>
<tr>
<td>Four months old</td>
<td>Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b, hepatitis B (DTaP/IPV/Hib, HepB)</td>
<td>One injection</td>
</tr>
<tr>
<td></td>
<td>Pneumococcal (PCV)</td>
<td>One injection</td>
</tr>
<tr>
<td></td>
<td>Meningococcal B</td>
<td>One injection</td>
</tr>
<tr>
<td>Around 12 months</td>
<td>Haemophilus influenzae type b, Meningitis C (Hib/MenC)</td>
<td>One injection</td>
</tr>
<tr>
<td>12 to 13 months</td>
<td>Meningococcal B</td>
<td>One injection</td>
</tr>
<tr>
<td>Around 13 months</td>
<td>Measles, mumps and rubella (MMR)</td>
<td>One injection</td>
</tr>
<tr>
<td></td>
<td>Pneumococcal (PCV)</td>
<td>One injection</td>
</tr>
<tr>
<td>Three years four months to five years old</td>
<td>Diphtheria, tetanus, pertussis (whooping cough) and polio (dTaP/IPV or DTaP/IPV)</td>
<td>One injection</td>
</tr>
<tr>
<td></td>
<td>Measles, mumps and rubella (MMR)</td>
<td>One injection</td>
</tr>
<tr>
<td>Thirteen to 18 years old</td>
<td>Tetanus, diphtheria and polio (Td/IPV)</td>
<td>One injection</td>
</tr>
</tbody>
</table>

**Substitution of Annex K of the principal Directions**

24. For Annex K of the principal Directions (amendments made to the General Medical Services Statement of Financial Entitlements Directions 2013) substitute—

“Annex K
Amendments to the General Medical Services Statement of Financial Entitlements
signed in March 2013
(amendments made from April 2013)

(a) The General Medical Services Statement of Financial Entitlements (Amendment) Directions 2013 which were signed on 18th September 2013.
(b) The General Medical Services Statement of Financial Entitlements (Amendment) Directions 2014 which were signed on 28th March 2014.
(c) The General Medical Services Statement of Financial Entitlements (Amendment No. 2) Directions 2014 which were signed on 30 September 2014.
(d) The General Medical Services Statement of Financial Entitlements (Amendment) Directions 2015 which were signed on 23 March 2015.
(e) The General Medical Statement of Financial Entitlements (Amendment No.2) Directions 2015 which were signed on 28th September 2015.

(f) The General Medical Services Statement of Financial Entitlements (Amendment No.3) Directions 2015 which were signed on 6th October 2015.

(g) The General Medical Services Statement of Financial Entitlements (Amendment No.4) Directions 2015 which were signed on 4th December 2015.

(h) The General Medical Services Statement of Financial Entitlements (Amendment) Directions 2016 which were signed on 31st March 2016.

(i) The Statement of Financial Entitlements (Amendment No.2) Directions 2016 which were signed on 9th May 2016.

(j) The Statement of Financial Entitlements (Amendment No.3) Directions 2016 which were signed on 24th November 2016.

(k) The Statement of Financial Entitlements (Amendment) Directions 2017 which were signed on 31st March 2017.

(l) The Statement of Financial Entitlements (Amendment No. 2) Directions which were signed on the 30th October 2017.”.

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

Name: Edward Scully
Member of the Senior Civil Service
Date: 29th March 2018
Department of Health and Social Care