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Directly bookable appointments – guidance for practices

[Publication \(/publication\)](#).

Content

- [Introduction](#)
- [Direct booking of appointments](#)
- [Types of directly bookable appointment](#)

Version 1

Introduction

This document sets out guidance on requirements for online appointment booking following changes to General Medical Services (GMS), Personal Medical Services (PMS) and Alternative Provider Medical Services (APMS) contractual arrangements that will apply in England from October 2022 and originally described in the [2022/23 GP contract letter \(https://www.england.nhs.uk/publication/letter-general-practice-contract-arrangements-in-2022-23/\)](https://www.england.nhs.uk/publication/letter-general-practice-contract-arrangements-in-2022-23/).

The previous contractual requirement stated that “all practices will ensure at least 25% of appointments are available for online booking”. This requirement – that applied to the entirety of the practice’s appointments – has been replaced by a requirement that practices instead make all of their “directly bookable” appointments available online, as well as by phone or in-person.

Under the amended legislation, practices are able to decide which of their appointments should be made available for direct booking having had due regard to this guidance.

Direct booking of appointments

Definition: The term ‘directly bookable’ refers to appointments that can be booked by patients or their representative via any means including online, over the phone or in-person.

The legislation was changed in recognition that many practices use triage and navigation processes to make an initial assessment of patients’ needs so that patients can be provided with care from the most appropriate member of staff and with regard to the relative urgency of the issue.

Therefore, any appointments that do not need to go through a triage process, could be available for patients to book directly online, by phone and/or by visiting the practice. The practice should consider the impact on convenience for patients, administrative burden for staff, equitable access for different patient groups and the practice’s overall workflow processes and model of care. As technology evolves, the type of appointments that could be made available for patients to book directly may increase, for example when a patient can be offered a choice of specific appointments slots appropriate to their needs following a triage or assessment.

Types of directly bookable appointment

It will be for each practice to determine the types of appointment that are made available for direct booking and this should align with the practice’s own working practices and procedures.

The below list gives examples of appointment types that may be appropriate to be offered via direct booking:

- Asthma clinic
- Blood tests

- B12 injection
- Childhood vaccinations
- Contraception appointment
- Cholesterol monitoring
- Carer health check
- Chronic obstructive pulmonary disease (COPD) clinic/monitors
- Diabetic review
- Dressing/wound care
- Dementia assessment
- Flu vaccination
- Anti-coagulant clinic
- Medical examinations for employers e.g. heavy goods vehicle (HGV) licence
- New patient health check
- Removal of stitches/wound dressing
- Routine injections (non-travel)
- Cervical screening
- Travel vaccinations.

As individual practice population needs can vary significantly, this list should not be seen as mandatory or exhaustive.

An alternative method can be to use the [national set of GP appointment categories](https://www.england.nhs.uk/publication/gpad-appointment-categorisation-guidance-2021-22/) (<https://www.england.nhs.uk/publication/gpad-appointment-categorisation-guidance-2021-22/>). Under this method, selecting those appointments that have been mapped to the ‘planned clinics’ and ‘planned clinical procedure’ category under ‘care related encounter’ slot types would be recommended.

Practices may want to use a combination of the above methods or an alternative to categorise appointments that are made available for direct booking.

In all cases, practices should ensure that appointment names are understandable to patients to reduce the risk of incorrect booking – for example, using the term “blood tests” instead of “phlebotomy”. Practices should also ensure that the same appointments are available for booking online, over the phone and/or by visiting the practice.

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[▲ Back to top](#)