

## **Protocol for: Declining Private Letter Requests**

**Written by: Lisa Herridge**

**Review: Alternative years**

---

### **Purpose**

---

The purpose of this policy is to:

- Set out a clear, consistent approach for handling requests for private letters and reports that fall outside the NHS General Medical Services (GMS) / Personal Medical Services (PMS) contract.
- Provide clear information to patients and external organisations about what the practice will and will not provide.

### **Scope**

---

This policy applies to:

- All registered patients and any third parties (e.g. solicitors, employers, insurers, schools, housing providers, council, armed forces, gyms, private healthcare providers) requesting letters or reports.

### **Policy Statement**

---

Seaside Medical Centre has taken the decision to decline all requests for private letters that are not part of our NHS contractual obligations.

This includes, but is not limited to, letters or forms requested for:

- Housing or homelessness applications
- Gym / exercise / slimming club / sports participation
- Fitness to work / return to work (where a Med 3 is not indicated)
- University / school / exam boards / mitigating circumstances
- Benefit appeals or supporting letters (unless specifically commissioned)
- Character references or non-medical statements of support
- Confirmation that a patient “is under the care of” or “has been seen by” the GP
- Any other non-contractual, non-commissioned private letter or report

Where a service is not commissioned by the Surrey & Sussex ICB and is not required under the core GMS/PMS contract, the practice will not undertake it, whether or not a fee is offered.

## Rationale

---

The GMS/PMS contract requires practices to provide essential services: identification and management of illness, provision of health advice and referral to other services during core hours.

- Non-contractual private letters represent additional, unfunded workload and divert clinical and administrative time away from core NHS care.
- General practice is under significant workload and workforce pressure and it is necessary to limit non-essential work to maintain safe, high-quality care for all patients.

This approach is consistent with BMA safe working guidance and national advice on managing inappropriate workload transfer to general practice.

## What the practice will provide instead

---

Although we will not provide private letters, we will:

### 1. Maintain accurate medical records

- Clinicians will continue to document consultations and clinical decisions in the patient record as usual.

### 2. Provide access to records

- Patients may access their records via the NHS App or online services.
- Patients may make a Subject Access Request (SAR) for copies of their medical records, which will be provided in line with data protection legislation.
- Third parties (e.g. solicitors, insurers) may request medical information with the patient's explicit consent, and this will be processed under the appropriate legal framework (e.g. SAR, formal medical report arrangements) where this is reasonable and resourced.

### 3. Provide statutory fit notes (Med 3)

- Where clinically appropriate and in line with national guidance, GPs will issue Med 3 fit notes for sickness absence of more than 7 calendar days.
- For absences of 7 days or fewer, patients are expected to self-certify, and the practice will not provide private sick notes or letters.
- Appointments should not be used for administrative purposes that fall outside the contract.
- If the patient has a clinical concern, they may be offered an appointment for clinical assessment, but this will not be for the purpose of generating a private letter.

## Communication of policy

---

This policy will be:

- Published on the practice website.
- Displayed in the waiting room (summary version).

## Review

---

This policy will be reviewed every 2 years, or sooner if:

- There are changes to the GMS/PMS contract.
- New services are commissioned by the Surrey & Sussex ICB that affect private work.
- National guidance (e.g. from Surrey & Sussex or BMA) changes.

Version:	Review date:	Edited by:	Approved by:	Next review due	Comments:
			L Herridge	02.04.2028	
	08.04.26	Cherryl Rose			Edited for patient version – Website/waiting rooms