To:
- General practices
- Primary care network clinical directors

Cc:
- Regional directors of primary care
- Regional primary care medical directors
- Integrated care boards primary care leads
- Integrated care boards chief operating officers

NHS England
Wellington House
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10 July 2026

Dear colleagues,

General practice patient list validation

We recognise there is growing interest in NHS England's ongoing patient list validation programme and the use of FP69 processes where there is evidence that a patient may no longer be resident in England. We are therefore writing to explain:

- how the programme operates
- the safeguards in place to protect patients
- the approach being taken to support accurate GP registration lists

Why maintaining accurate patient lists matters

NHS England has always worked with general practices to regularly review their lists and improve their accuracy. Maintaining accurate patient lists helps ensure:

- patients are appropriately registered and can receive care from the correct practice
- NHS services can be planned using reliable population data
- NHS resources are allocated fairly

It is important that funding follows patients, rather than practices receiving money for patients no longer registered or living in England. This includes other costs, such as IT software licences and other services funded on a per-patient basis.

NHS England's analysis indicates there are significantly more patients recorded on GP registration lists than would be expected based on the Office for National Statistics (ONS) population estimates. Some of this difference arises from people who have left the country without notifying their practice or formally deregistering.

How the programme works

How patients are identified and reviewed

The patient list validation programme builds on long-standing arrangements that NHS England uses to support the accuracy of GP registration lists.

It does not create a new process for removing patients from GP practice lists. Instead, it improves the methods used to identify patients who may no longer be resident in England and applies established FP69 procedures where appropriate.

NHS England uses a range of demographic and administrative indicators, alongside statistical modelling, to identify patients who may no longer be resident in England. These indicators are then subject to a series of further checks before any action is taken. Patients are not identified based on ethnicity, nationality or any other protected characteristic.

Most patients identified through this process are subsequently confirmed as having left England or moved out of the practice area and are therefore appropriately removed through existing FP69 procedures.

Safeguards and patient contact

There are specific safeguards in place which prioritise patient safety and continuity of care. Patients with evidence of recent NHS activity, such as an active prescription or recent hospital visit, are excluded before progressing through the process. NHS England currently applies a minimum 18-month activity check using available data as part of these arrangements, helping to ensure that patients actively accessing NHS services are not inappropriately identified.

Where a patient is identified as potentially no longer resident in England, they are contacted and given multiple opportunities to confirm or update their details. Contact may take place through a combination of letter, email and SMS, depending on the information available.

Patients can respond through a number of routes and are given sufficient time to do so before any further steps are taken. All validation checks and attempts to contact the patient are completed before an FP69 is set, and the establish process is initiated.

Importantly, patients are not removed from a practice list solely because they do not respond to a single communication. The programme relies on a combination of information sources, validation processes and safeguards, with practices continuing to have a role through established FP69 arrangements. From initial identification of a patient who may no longer be resident in England through to any subsequent removal from a practice list, the process takes more than 5 months.

In the unlikely event that a patient is removed in error, arrangements are in place to support rapid re-registration and continued access to NHS services.

Impact on practices and funding

We also understand there are concerns regarding the potential impact of this work on practices.

Maintaining accurate patient lists is important to ensuring that NHS resources are distributed fairly and more closely reflect the population receiving care. The government remains committed to the overall general practice funding envelope for 2026/27, and funding released will remain within general practice services and be reinvested accordingly.

NHS England is undertaking further work to understand distributional impacts and is working with integrated care boards to identify the small number of practices that may experience disproportionate effects. The programme is being delivered in phases over several years to manage the existing backlog of inaccurate registrations in a proportionate manner.

Our ongoing commitment

NHS England will continue to talk to stakeholders as this work progresses and will review the evidence, monitor impacts and ensure that appropriate safeguards remain in place.

Thank you for your continued support and for the care you provide for patients every day.

Yours sincerely

Dr Amanda Doyle

National Director Primary Care and Community Services

NHS England