

# NHS Pension Scheme (Scotland)

## 2026/06

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| <b>Who should read:</b> | NHS HR and Payroll Managers<br>GP Practice Managers<br>Direction Bodies<br>Practitioner Services Division (PSD)<br>Dental Payments              |
| <b>Action:</b>          | Employers to ensure members are being correctly classified Practitioner or Officer members and that contributions are being assessed correctly. |
| <b>Subject:</b>         | Categorising Practitioner and Officer Employments                                                                                               |
| <b>Date:</b>            | 27 October 2026                                                                                                                                 |

**The purpose of this circular is to provide guidance for employers (primarily NHS Health Boards) on categorising General Practitioner (GP) and General Dental Practitioner (GDP) employments as ‘Practitioner’ or ‘Officer’ for pension scheme purposes.**

Key information in this circular:

- Employers are required to correctly categorise GP and GDP member employments as Officer or Practitioner
- Employers should follow this guidance to ensure the right membership category is applied and employee contributions are deducted correctly.

## 1. Introduction

1.1. As part of the analysis around SPPA's [Practitioner Contributions Remediation Project](#) it has become clear there may be some inconsistency with how employers are treating work done by GPs/GDPs outside their normal General Medical Services (GMS) or General Dental Service (GDS) contract obligations.

## 2. Background

2.1. There are two categories of membership within the NHS Pension Scheme (Scotland) (NHSPS[S]), **‘Officer’** and **‘Practitioner.’**

2.2. GPs and GDPs can work in both types of roles, Officer and Practitioner, and they can hold separate Practitioner and Officer roles at the same time.

2.3. As a result of changes to the delivery of primary care, changes to the GMS contract and HMRC changes to tax legislation, the classification of Practitioner and Officer employments has become more complex.

2.4. In 2006 SPPA issued [circular 2006/08](#) which provided updated guidance on the flow of contributions and collection arrangements for GPs/GDPs. It also included a table in Annex A which sets out the status for all members performing NHS services. This table has been reproduced and amended annually. The latest version can be found in Annex C of [circular 2026/03](#).

### 3. Importance of categorising members correctly as Officer or Practitioner

3.1. The employee contribution rate applied to a member's pensionable earnings is determined differently depending on whether they are in an Officer or Practitioner employment. The applicable contribution rates are determined as follows:

- **Practitioner employments** – the contribution rate is determined by aggregating earnings from all Practitioner employments and allocating a single contribution rate based on total earnings.
- **Officer employments** – the contribution rate is set based on aggregated earnings only, where employments are with the same employer. Where the employments are with different employers, the contribution rate is determined separately based on earnings in each individual employment

3.2. Additionally, while both Practitioners and Officers are members of the one NHS Pension Scheme, in the legacy NHS scheme (1995 and 2008 Sections), Officer member benefits accrue on a final salary basis, whereas Practitioner member benefits accrue on a Career Average Revalued Earnings (CARE) basis.

3.3. The "GP pension flexibilities" allow the SPPA to automatically compare pension benefits at retirement based on different accrual methods for Practitioner and Officer service. The highest pension is selected through the 'no detriment' test. However, there are certain periods of Officer service that cannot be converted to Practitioner service according to the scheme rules.

3.4. In the NHS Pension Scheme 2015, both Officer and Practitioner members accrue pension on a CARE basis. However, for those with accrued pension in the legacy scheme, the growth of that pension can still be influenced by whether the individual has Officer or Practitioner service in the 2015 Scheme.

3.5. Therefore, categorising employments incorrectly can have an impact on a member's final pension outcome.

#### 4. General Practitioners - Determining Officer or Practitioner Employment

4.1. The pension scheme rules are clear that the term 'Officer member' expressly excludes GP Performers. Therefore, if the role the individual is carrying out is that of a GP Performer, their employment must be treated as Practitioner employment rather than Officer employment.

4.2. A GP Performer is defined as a medical practitioner who is providing Primary Medical Services (PMS) as part of a General Medical Services (GMS) contract, a section 17C agreement or as a Health Board PMS contractor. A GP Performer can also be an individual delivering PMS on behalf of an Out of Hours (OOH) provider or importantly for a Health Board, either on a self-employed basis (contract for services) or under a contract of employment (contract of service). The role the individual is carrying out must support the Board in its provision of PMS.

4.3. Those members carrying out Assistant Practitioner roles are also considered as Practitioner employments. Assistant Practitioners are defined as individuals who are not principal GPs and who are engaged on a self-employed basis (contract for services), or on a formally employed basis (contract of service), with a GP Practice, OOH provider, or a Health Board. In that employment they spend all or most of their time assisting their employer in the delivery of PMS.

4.4. A summary of the applicable NHS Pension Scheme (Scotland) (NHPSP[S]) regulations relevant to GPs can be found in **Annex C**.

4.5. Therefore, based on the definitions included in the regulations, determining whether an individual should be classed as a Practitioner or Officer in any given employment is dependent on the role they are carrying out. All Practitioners are required to be fully registered and must appear on the Health Board's medical performers list. If the individual is delivering PMS, including OOH services, in that employment they should be treated as a Practitioner. How the individual is paid is not relevant in determining their status and Practitioners can be salaried on a Health Board's payroll or paid via a fee-based arrangement.

4.6. It is also important to note that when determining whether the employment is Officer or Practitioner, an assessment should be made of the duties of the role. It is not determined by who is employed to carry out that role. In most case GPs will be contracted in Practitioner roles engaged in the delivery of PMS, however, where that is not the case, the role should not be categorised as a Practitioner role.

4.7. Where a GP is contracted by a Health Board in a role which is not engaged in the delivery of PMS, that role should be classed as an Officer role for the purposes of the pension scheme.

4.8. Hospital doctors, e.g. Consultants, are treated as Officer members in the pension scheme.

## 5. Dental Practitioners - Determining Officer or Practitioner Employment

5.1. The classification of GDPs as Practitioners or Officers differs somewhat from GPs and the pension scheme regulations take a different approach.

5.2. For Dental Practitioners only, their classification should be based on how their income is derived. If income is derived from 'salary, wages and fees' from an individual's 'employment' with an NHS organisation (i.e. a Health Board) then they are considered to be an Officer member. If their income is derived from 'practitioner income' then they are considered to be a Practitioner.

5.3. Practitioner income is defined for General Dental Practitioners as all applicable fees and allowances paid through their list number, in most cases from operating a dental practice. Any salary of Assistant Dental Practitioners (ADP) in their employment and any payment to cover the cost of practice expenses should be deducted from practitioner income. In the case of an ADP, their practitioner income is their salary from their employment with a GDP.

5.4. Hospital dentists are treated as Officers for pension scheme purposes.

5.5. A summary of the applicable NHS Pension Scheme (Scotland) (NHPSP[S]) regulations relevant to GDPs can be found in **Annex C**.

## 6. Responsibility for making determination on whether a role is an Officer or Practitioner Employment

6.1. It is the employer's responsibility to determine whether a role is a Practitioner or Officer role and to advise SPPA when the individual commences the post.

6.2. We understand that employers' processes differ, however, it is important that the determination of each employment is carried out by someone within the organisation who has an understanding of the duties of the role.

6.3. You can find a set of branch questions in **Annex A**, along with FAQs in **Annex B**, which are intended to assist staff in employing authorities with these determinations.

Please contact [sppapolicy@gov.scot](mailto:sppapolicy@gov.scot) if have any enquiries about this circular.

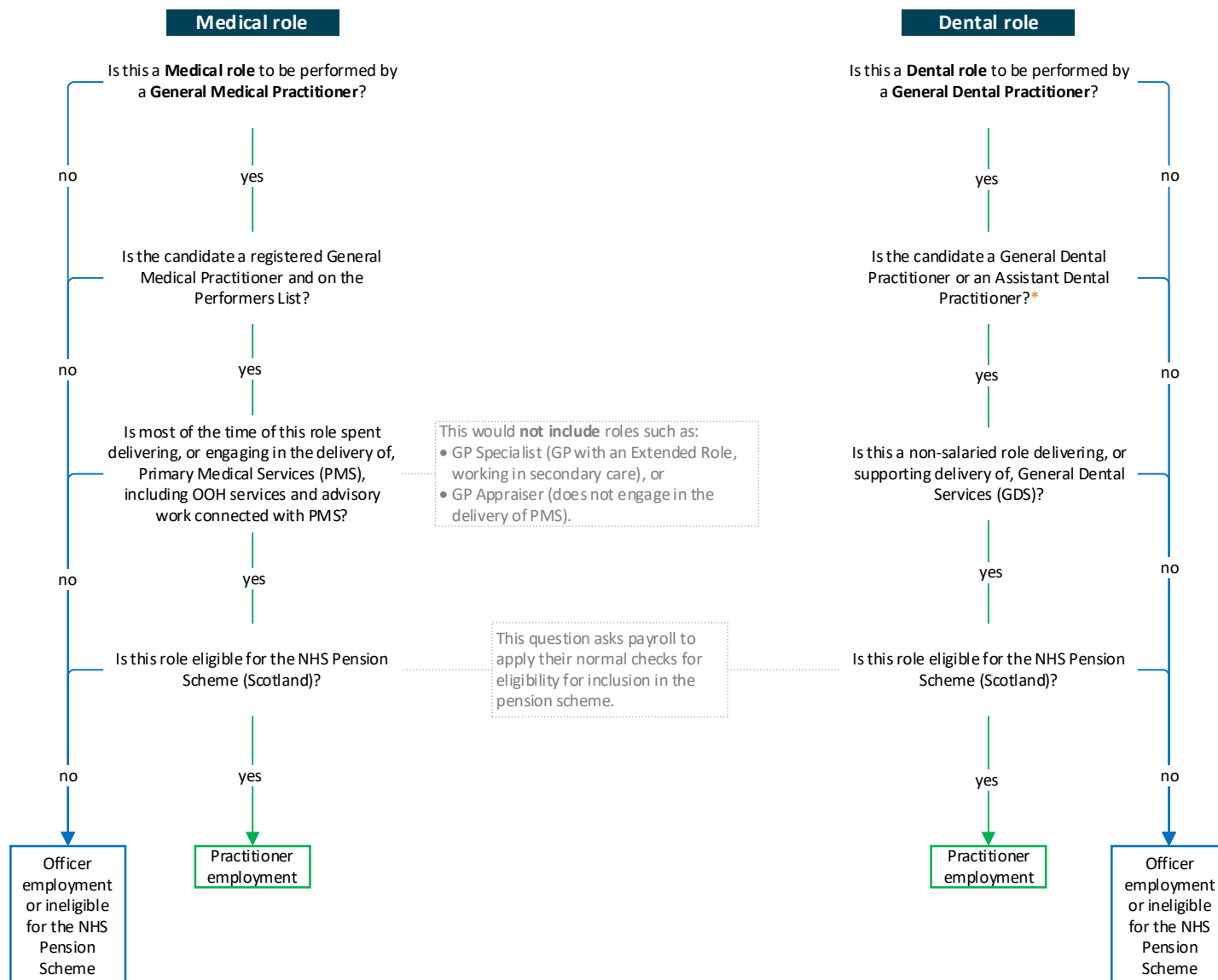
**SPPA Policy Team**

27 October 2026

## Annex A

### Branch questions to assist in determining Practitioner or Officer employment

#### Is an employment 'practitioner' or 'officer' for the purposes of the NHS Pension Scheme (Scotland)?



\* General Dental Practitioner – a dentist included in sub-part A of the first part of a dental list prepared in accordance with the NHS (General Dental Services) (Scotland) Regulations 2010.  
Assistant Dental Practitioner – a dentist included in the second part of a dental list prepared in accordance with the NHS (General Dental Services) (Scotland) Regulations 2010.

**Annex B****Frequently Asked Questions****Q1. We employ salaried GPs under a contract of employment to work in our Primary Care Out-of-Hours Service. Should they be Officer or Practitioner?**

**A1.** These GPs should be treated as Practitioners because in their role they are providing Primary Medical Services. The fact that they are paid by salary under a contract of employment does not impact on how they are categorised for pension scheme purposes.

**Q2. We employ a GP with an Extended Role (GPwER) to work as a specialist in a secondary care department. Should they be treated as an Officer or Practitioner?**

**A2.** This GP would be classed as an Officer for this employment because this role is not engaged in the delivery of Primary Medical Services and this role is activity that is beyond the scope of their primary care duties.

**Q3. We employ a salaried GDP in our Public Dental Service (PDS) who also retains their own dental practice and carries out additional work as an independent contractor. Should they be treated as an Officer or Practitioner?**

**A3.** This GDP would be treated as an Officer for their work with the PDS because they are paid by salary from the Health Board. They would also have concurrent Practitioner membership in respect of their pensionable service as an independent contractor dentist.

**Annex C****Summary of [NHSPS(S)] Regulations relevant to GPs and Dentists****GPs**

**Officer** = A person, other than GP Performer, employed by an employing authority

**Practitioner** = a GP Provider or GP Performer. Trainee GPs (GP Registrars) are not considered to be Practitioners. Practitioner also includes GDPs.

**GP Provider** = A GP Performer who is a "sole trader" in a single-handed GP practice or partner in a GP practice and who provides PMS.

**GP Performer** = A GP, other than a trainee GP or a locum, who is on the medical performers list of approved GPs, who provides PMS (including OOH services).

**Assistant Practitioner** = a GP Performer, who is not a GP Provider, who is employed on a self-employed basis (contract for services) or on a formally employed basis (contract of service) with a GP Practice, OOH provider, or a Health Board. In that employment spends all or most of their time assisting their employer in the discharge of the employer's duties as a GP Practice, a Health Board Primary Medical Services (HBPMS) contractor, an OOH provider, or a Health Board.

**Medical Practitioner** = A registered GP on the medical performers list of approved GPs who:

- works for a GMS Practice (two or more individuals practising in partnership or a company limited by shares who have entered into a GMS contract or local 17C agreement with a Health Board).
- works for an HBPMS contractor (a person with whom the Health Board has made arrangements to provide PMS but only if that person would be eligible to enter into a GMS contract).
- works for an OOH provider who is a limited company or a body corporate.
- A GP who is a single-handed GP or partner in partnership in any of the above.
- A GP who is a shareholder in a GP Practice or an HBPMS provider.
- An Ophthalmic provider, providing general ophthalmic services.

**Assistant Medical Practitioner** = a GP Performer, who is not a GP Provider, who is employed on a self-employed basis (contract for services) or on a formally employed basis (contract of service) with a GP Practice, OOH provider, or a Health

Board. In that employment, spends all or most of their time assisting their employer in the discharge of the employer's duties as a GP Practice, a HBPMS contractor, an OOH provider, or a Health Board.

**Non-GP Provider** = a partner in a partnership that is a GMS practice who is not a GP provider and who demonstrates to the satisfaction of the scheme manager that he or she assists in the provision of NHS services provided by that practice.

**Practitioner Income: Medical Practitioner** = income derived from a GMS contract, Section 17C Agreement, HBPMS contract; in respect of the performance of PMS. Income from engagement by a Health Board to assist in the provision of PMS under section 2C (2) arrangement. Income from the provision of locum services. Payments made to the member by an employing authority in respect of the provision of primary dental services, general ophthalmic services, or pharmaceutical services. Payments for practice-based work carried out in educating or training of medical students or practitioners. Payment of other fees and allowances as approved by the Scottish Ministers and detailed in the Statement of Financial Entitlement issued by them.

Charges collected from patients in respect of delivery of PMS which the member is authorised by or under an enactment to retain. Sums paid to M out of a fund determined by reference to the number of beds in a hospital. Allowances and other sums paid in respect of Board and advisory work.

**Practitioner Income: Assistant Practitioner** = all salary, wages, fees, and other regular payments paid to the practitioner by an employing authority in respect of the performance of PMS but does not include bonuses or payments made to cover expenses. Payment of allowances and any other sums (but excluding payment made to cover expenses) paid by an employing authority in respect of Board and advisory work. Payment for practice-based work carried out in educating or training, or organising the education or training of, medical students or practitioners.

**Board and Advisory Work** = means:

- (a) work undertaken as a member of the Board of an employing authority which is not a GMS practice, a Section 17C Agreement provider, an HBPMS contractor or an OOH provider; or
- (b) advisory work commissioned by and undertaken on behalf of such an authority, if it is connected to the authority's role in performing, or securing the delivery of, primary medical services or associated management activities or similar duties.
- (c) but which is not in itself the performance of primary medical services, and payment for which is made by that authority directly to the person carrying out that work.

Practitioner income includes allowances and other sums paid in respect of **Board and advisory work**.

## Dentists

**General Dental Practitioner** = a dentist included in sub-part A of the first part of a dental list prepared in accordance with the National Health Service (General Dental Services) (Scotland) Regulations 2010.

*<sup>1</sup>"The first part of the dental list shall be further divided into two sub-parts: sub-part A of which shall comprise a list of dentists and bodies corporate who have undertaken to provide general dental services in the Health Board's area"*

**Assistant Dental Practitioner** = a dentist included in the second part of a dental list prepared in accordance with the National Health Service (General Dental Services) (Scotland) Regulations 2010.

*<sup>2</sup>"(2) The dental list shall be divided into two parts—*

*(a) the first part of which shall be of dentists and bodies corporate who have undertaken to provide general dental services under arrangements with the Health Board in terms of these Regulations; and*

*(b) the second part of which shall be of dentists who are approved by the Health Board to assist in the provision of such services."*

## Practitioner Income: Dental practitioner

In respect of a general dental practitioner, the member's income includes all fees and allowances as approved by the Scottish Ministers and paid under the dentist's list number.

For dentists operating their own practice, practitioner income for pension purposes would be less an amount for—

(a) salary of any assistant dental practitioner in the general dental practitioner's employment; and

(b) any payment to cover the cost of practice expenses.

In the case of an assistant dental practitioner, the member's earnings are the salary as agreed by the Scottish Ministers.

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<sup>1</sup> <https://www.legislation.gov.uk/ssi/2010/208/regulation/4/made>

<sup>2</sup> <https://www.legislation.gov.uk/ssi/2010/208/regulation/4/made>