

## DDRB Uplift 2026-27 - FAQs

### Context

The Government have accepted the Doctors' and Dentists' Review Body (DDRB) recommendations for the uplift in GP pay for the year 2026/27. This document aims to address frequently asked questions regarding the implementation and implications of the DDRB's recommendations.

### What is the DDRB recommendation for 2026/27?

The DDRB has recommended a 3.5% uplift for contractor GPs as well as salaried GPs. This is inclusive of the 2.5% public sector pay assumption already included within the initial contract agreement, meaning the DDRB recommendation will result in a further aggregate 1% uplift to the pay elements of Global Sum. Uplifts are also being applied to ARRS maximum reimbursable rates, SFE locum reimbursements, and Enhanced Access funding.

We are still awaiting confirmation from NHSE whether uplifts will be applied to educational allowances, GP trainer grants, Fellowship funding, dispensing fee scales, and GP Educator pay scales.

### How will this uplift be funded?

Additional funds will be distributed through uplifts to Global Sum, locum reimbursement rates, and relevant PCN budgets (the ARRS and Enhances Access Service budgets). These budgets should be adjusted in time for the start of the new contract on April 1<sup>st</sup>, meaning the uplift will not be paid in arrears this year.

### What will the new Global Sum payment per weighted patient be?

The Global Sum Payment per weighted patient will increase to £130.07. This is an increase of £6.73 compared to 2025/26.

Global sum	2025/26 payment	2026/27 payment
Global Sum Payment PWP	£123.34	£130.07



### Does the uplift apply to ARRS staff?

The maximum reimbursable amount for ARRS GPs will be uplifted by the full 3.5%.

The new maximum reimbursable rate ( including on costs) is:

ARRS GP reimbursement	2025/26 rate	2026/27 rate
Standard	£110,148	£151,416
Including London Weighting	£113,057	£154,355

Other ARRS staff will receive a total pay uplift of 3.3%, based on the uplift for Agenda for Change staff recommended by the NHS Pay Review Body (PRB).

The ARRS budget allocation has been uplifted accordingly.

### Will locum reimbursements be uplifted as well?

Yes, an additional 3.5% uplift will be applied to the current rates.

Although we await final confirmation of the figures from NHSE, the new locum reimbursement rates (calculated by GPCE) should be as follows:

Type of reimbursement	2025/26 rate	2026/27 rate
Sick leave	£2,238.03	£2,316.36
Suspension & study leave	£1,460.56	£1,511.68
Parental leave – first two weeks	£1,475.17	£1,526.80
Parental leave – thereafter	£2,238.03	£2,316.36

Practices should continue to claim as normal and ICBs will adjust for any uplift applicable from 1/4/26

### Will educational allowances be uplifted as well?

We are awaiting confirmation from NHSE on this.

### Will the GP trainer grant be uplifted as well?

We are awaiting confirmation from NHSE on this.

### Will GP Fellowship funding be uplifted as well?

We are awaiting confirmation from NHSE on this.

### Will dispensing fee scales uplifted as well?

We are awaiting confirmation from NHSE on this, but, if so, this will apply from October 2026

### **Will the GP Educator pay scale be uplifted as well?**

We are awaiting confirmation from NHSE on this.

### **Will additional funding suffice to cover pay uplifts for all staff?**

This will depend on the practice, as different practices have differing staffing arrangements. Additional funding is distributed on the basis of weighted patient list size, which does not correspond directly to staffing expenses. Some practices may have fewer patients per staff member, or employ staff on higher salaries, e.g. because they employ more GPs or employ more senior staff. These practices are at risk of not receiving enough additional funds through Global Sum to afford a 3.5% pay rise for *all* staff.

### **I am a GP Contractor. Do I have to give my salaried GPs the full 3.5% uplift?**

GP practices are expected to implement the DDRB uplift as accepted and funded by the Government, though they are not legally bound to apply it unless specified in the employees' contract. The unmodified BMA Model Contract includes a clause linking annual salary uplifts to the DDRB Award, and GMS and PMS contractors are required to employ salaried GP colleagues under the BMA Model Contract or on terms and conditions "no less favourable".

This year's 3.5% recommendation applies to salaried GP pay in 2026/27 compared to 2025/26.

The published BMA Salaried pay scales will be uplifted to reflect these changes.

[Read the BMA DDRB myth buster for salaried GPs](#)

### **I am a GP Contractor. Do I have to give my non-GP staff a 3.5% uplift as well?**

While the DDRB uplift is specifically recommended for salaried GPs, practices may also consider providing an equivalent uplift to non-GP staff. This is also strongly encouraged by the Government, who have said that they 'expect General Practice Contractors to implement pay rises to other practice staff in line with the uplift in funding they are receiving'.

However, this is not mandated and is subject to the overall financial constraints within each practice. Practices are encouraged to evaluate their budgets before making any such decisions regarding non-GP pay uplifts.

### **I am a Salaried GP employed by a GP practice. What can I expect?**

If you are employed under the unmodified BMA Model Contract, your employer is expected to implement the full 3.5% uplift as mandated by the contract. For other contracts, the uplift is not legally binding unless specified, but practices are encouraged to follow the DDRB recommendations.

[Read the BMA DDRB myth buster for salaried GPs](#)

**I am a Salaried GP employed in a non-practice setting. What can I expect?**

If you are a salaried GP employed in a non-practice setting, the application of the 3.5% uplift will depend on the terms of your contract and your employer's policies. Unlike GP practices, non-practice employers are not bound by the BMA Model Contract and may have different agreements in place. However, as the Government has accepted the DDRB recommendation, it is advisable to check with your employer whether they intend to apply the uplift in line with these recommendations.

It is also recommended to review your contract for any clauses related to pay increases and to have a discussion with your employer about the possibility of implementing the 3.5% uplift. While not mandated, employers in non-practice settings may still choose to follow the DDRB recommendations to maintain competitive and fair compensation for their salaried GPs.

[Read the BMA DDRB myth buster for salaried GPs](#)