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Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref: CG/PO/135/2026

Elin Jones AS/MS
Llywydd
Senedd Cymru

Cc: Chair of the Legislation, Justice and Constitutional Committee

11 March 2026

Dear Elin,

In plenary on 27 January Adam Price raised a without notice question to me regarding an aspect of the National Health Service (General Medical Services Contracts) (Prescription of Drugs Etc) (Wales) (Amendment) (No 2) Regulations 2024 (“the No. 2 Regulations”) which was referred to in the judgment in the case of ATB v Welsh Ministers.

I have reviewed the matter. In strict terms the effect of the No. 2 Regulations was to amend an exception to the restriction on prescribing puberty blockers that was established in the National Health Service (General Medical Services Contracts) (Prescription of Drugs Etc.) (Wales) (Amendment) Regulations 2024 (“the 2024 Regulations”). However, in the explanatory notes and explanatory memorandum to the No. 2 Regulations the effect was described as being an extension of that restriction.

In the case of ATB v Welsh Ministers the Welsh Government clarified this point in our summary grounds of resistance.

The Cabinet Secretary for Health and Social Care agrees with the points I set out in this letter.

The overall intention as set out to the Senedd at the time the No. 2 Regulations were considered was accurate and has not changed – that is that puberty blockers cannot be prescribed in NHS general practice in Wales for under-18s save for narrow exceptions. It was in this ordinary sense that the Welsh Government sought to convey the effect of both sets of regulations as imposing restrictions on the prescription of puberty blockers to under 18s by the NHS in Wales.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

References in the explanatory memorandum and explanatory note to the No. 2 Regulations to extending or widening the restrictions and clarifying that the restrictions apply to “any prescriber working under a general medical services contract” were used in that ordinary sense of describing the overall effect across general practice, namely that all prescribers working under a general medical services contract would be, in essence, caught by the same regime (and therefore subject to the same restrictions and exceptions). This aligns with what Members were told and, I believe, would have understood from the context at the time. The explanatory memorandum, read as a whole and alongside the explanatory note and debate, conveyed that intention and outcome.

It may be helpful to consider the effect of regulation 3 of the National Health Service (General Medical Services Contracts) (Prescription of Drugs Etc.) (Wales) Regulations 2004 (“the 2004 Regulations”) which the 2024 Regulations and No. 2 Regulations amended. By virtue of regulation 3 the addition of puberty blockers into Schedule 2 to the 2004 Regulations was to set up a prohibition on ordering puberty blockers for patients under a general medical services contract subject to exceptions (regulation 3(a) and (b)). The 2024 Regulations had made provision so that for under 18s puberty blockers could be ordered by a GP but only for treatment other than puberty suppression in respect of gender dysphoria, gender incongruence or both. The effect was that non-GP prescribers under general medical services contracts were prohibited from doing this by virtue of the amendments made by the 2024 Regulations. The No. 2 Regulations made a further amendment in relation to this restriction on the patients and the purposes for which puberty blockers could be ordered under a general medical services contract. This amendment was, in effect, to ensure that all prescribers under a general medical services contract were subject to the same restriction on the patients and purposes for which puberty blockers could be ordered for treatment. It is in this sense that the references to extending or widening the restriction were made.

In short, the language used in the explanatory memorandum and explanatory note to the No. 2 Regulations reflected the practical reality that the restrictions would apply to anyone prescribing in NHS general practice under general medical services contracts, which was the express policy intention.

I do not consider that the Senedd would have been misled as to the overall effect of the No. 2 Regulations. However, on reviewing the matter I believe that an inadvertent error was made in the explanatory note and explanatory memorandum for the No. 2 Regulations. The Cabinet Secretary and I agree that the record should be corrected and apologise for the inadvertent error in describing the strict legal effect of those Regulations.

I am copying this letter to the Chair of the Legislation, Justice and Constitution Committee.

Yours sincerely,



Julie James AS/MS

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