EXPLANATORY MEMORANDUM TO

The Health and Personal Social Services (General Medical Services Contracts) (Amendment) Regulations (Northern Ireland) 2013
SR 2013 No. 59

1. Introduction

This Explanatory Memorandum has been prepared by the Department of Health, Social Services and Public Safety to accompany the Statutory Rule (details above) which is laid before the Northern Ireland Assembly.

2. Purpose

The Statutory Rule will make amendments to The Health and Personal Social Services (General Medical Services Contracts) Regulations (Northern Ireland) 2004. These principal regulations set out the framework for general medical services contracts and prescribe the conditions which must be met by GPs before they can enter into a general medical service contract, along with services which must be provided to patients, the regulations also prescribe terms included in the contract.

3. Background

Apart from minor technical amendments which update references in the principal regulations the main provisions in the amending regulations are to:-

(i) enable GP practices to specify within their GMS contract with the Health and Social Care Board an outer boundary area in addition to the practice area. Currently the principal regulations require a GMS contract to specify a practice area which is the area persons residing within are entitled to register with the practice. This amendment will allow a person who moves outside the current practice area but remains within the outer boundary area and wishes to remain on the practice's list of patients to do so if the contractor so agrees;

(ii) update references to vaccines and immunisations and updates the cross-references to the GMS Statement of Financial Entitlements which sets out which vaccines and immunisations a contractor must offer;

(iii) provide that a contractor must not enter into or renew or extend an existing arrangement for telephone services in a practice unless satisfied that a person will not pay more to make relevant calls to the practice than they would to make equivalent calls to a geographical number. This amendment introduces the legal power for the HSCB to implement current Departmental policy in relation to GP practices using 084 numbers i.e. patients should not incur charges above the equivalent of a local call when contacting their GP practice;

(iv) introduce new procedures relating to applications for closure of a practice's list of patients, applications for extension of closure period and re-opening of list of patients. Currently a practice which wishes to close its list of patients applies to the HSCB and if both parties are unable to reach agreement regarding the period of time for which the practice's list of patients will be closed that period is 12 months. This amendment sets a minimum period of 3 months and a maximum of 12 months. It also introduces procedures for an application for an extension of list closure and procedures for re-opening of lists before the expiry of an agreed closure period;

(v) specify the persons to whom GPs must disclose information (with the consent of the patient) in connection with claims for benefits. This amendment simply clarifies who a GP should provide clinical information to with the consent of the patient; and

(vi) make provision that the contractor's clinical governance system includes standard operating procedures in relation to the management and use of controlled drugs. Currently the principal regulations require that a contractor has an effective system of clinical governance and has

nominated a person with responsibility for ensuring the effective operation of the system.

4. Consultation

The GMS Contract is UK wide. These changes to the General Medical Services Contracts Regulations have been agreed with GPC.

5. Equality Impact

Consideration was given to equality and human rights implications of the minor policy changes introduced by these regulations. They were considered compatible with Sections 24 and 75 of the Northern Ireland Act 1998. An equality screening confirmed there was no potential for adverse impact on any of the Section 75 categories.

6. Regulatory Impact

A Regulatory Impact was not considered necessary as the minor changes being introduced to the GMS contract by these regulations have no impact on business, charities, social economy enterprises or voluntary bodies.

7. Financial Implications

The financial implications of the changes being introduced by these regulations will be de minimis.

8. EU Implications

Not Applicable

9. Parity or Replicatory Measures

The provisions included in the regulations will bring Northern Ireland into line with measures which are already in place in the rest of the UK.

10. Additional Information

For further information on these regulations please contact:-

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